City & Guilds Level 2
Health and Social Care: Core
Approved by Qualifications Wales
This qualification forms part of the new suite of Health and Social Care, and Childcare qualifications in Wales provided by City & Guilds/WJEC.
Sample Assessment Materials
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Level 2 Health and Social Care: Core Qualification

SAMPLE EXTERNAL ASSESSMENT

Multiple Choice Test
Level 2 Health and Social Care: Core Qualification

External Assessment

Level 2 Health & Social Care: Core (Adults)

**SAMPLE**

**Duration**
You have **1 hour 15 minutes** to complete this assessment
You should have the following for this assessment
• a multiple choice answer sheet
• a pen with black or blue ink

This question paper is the property of the City and Guilds of London Institute and is to be returned after completion of the assessment.

Read the following notes before you answer any questions
• You **must** use a pen with black or blue ink to complete all parts of the answer sheet.
• Check that you have the correct answer sheet for the test.
• Check that your name and candidate details are printed correctly at the top of your answer sheet.
• Inform the invigilator if your name or test details are not correct.
• Each question shows **four** possible answers (lettered ‘a’, ‘b’, ‘c’ and ‘d’); only **one** is correct.
• Decide which **one** is correct and mark your answer on the **answer sheet** with your pen.

For example if you decide ‘a’ is correct, mark your answer like this

![101] □ □ □ □

**Cancel**  **Cancel**  **Cancel**  **Cancel**

If you want to change your answer, cancel your first choice by filling in the ‘cancel’ box below the circle like this

![101] □ □ □ □

**Cancel**  **Cancel**  **Cancel**  **Cancel**

Then mark the answer which you have now decided is correct. For example if you now decide ‘c’ is correct, mark your answer like this

![101] □ □ □ □

**Cancel**  **Cancel**  **Cancel**  **Cancel**

Any other marks on the form may invalidate some of your answers.

• Any calculations or rough working can be done on the question paper.
• Attempt all questions. If you find a question difficult, leave it and return to it later.

This paper contains 45 questions. Answer them using the ‘boxes’ numbered 1 to 45 on the answer sheet.
1. What is the most important element of person centred care planning?

a) To give the individual access to a complaints process.
b) To prevent the individual from deciding on the plan by themselves.
c) To provide the individual with information on support available.
d) To ensure the individual remains central to the plan that affects them.

2. How does the Social Services and Well-being (Wales) Act aim to support rights based approaches?

a) It promotes voice and control.
b) It defines the active offer.
c) It identifies protected characteristics.
d) It ensures best interest decisions are made.

3. What term is defined by the following description?

‘Involving people and communities in the design and delivery of services. Doing things with, rather than doing things to, people.’

a) Well-being.
b) Co-production.
c) Multi-agency working.
d) Early intervention prevention.

4. What term is defined by the following description?

‘Treating everyone with fairness and respect and recognising the needs of individuals.’

a) Equality.
b) Inclusion.
c) Judgement.
d) Discrimination.

5. What is a ‘best interest’ decision based on?

a) The total cost to the service.
b) Views and opinions of staff members.
c) Assessment of an individual’s mental capacity.
d) Views and wishes of an individual's family.
6. When may it be suitable for a care and support worker to share personal information about themselves, in line with professional boundaries, when providing care to individuals?

   a) To ensure person centred care.
   b) To promote relationship centred working.
   c) To increase the benefits of co-production.
   d) To meet data protection legislation.

7. Gillian has a terminal illness and tells her care and support worker John that she is struggling to come to terms with her own death as she has no religious belief.

   What is an unacceptable way for John to respond to Gillian in this scenario?

   a) Arrange pastoral support for Gillian with her permission.
   b) Ask Gillian if she would like to speak to a palliative nurse or advocate.
   c) Express his beliefs around dying and contact her family to support Gillian.
   d) Listen with empathy to Gillian’s concerns and report the incident to a manager.

8. Which of the following is a key principle of the More than just words/Mwy na Geiriau initiative?

   a) To provide Welsh language options before English ones.
   b) To ensure care services actively provide Welsh language options.
   c) To provide free Welsh translation services in all care settings.
   d) To ensure care services only use workers who speak both Welsh and English.

9. Which of the following is most likely to reduce the need for restrictive practice?

   a) Treating all individuals the same.
   b) Asking for feedback on a monthly basis.
   c) Controlling the range of resources available to individuals.
   d) Supporting individuals to engage in activities important to them.

10. Which factor is most likely to help promote the health and well-being of individuals?

    a) Reducing alcohol intake.
    b) Restricting social contact.
    c) Regularly changing environment.
    d) Relying on others for financial support.
11. Which lifestyle factor is **most** likely to contribute to difficulties with continence?

a) Over eating.
b) Indigestion.
c) Excessive weight loss.
d) Poor physical mobility.

12. Which parts of the body are **most** likely to be affected by pressure ulcers?

a) Scalp and neck.
b) Stomach and knees.
c) Shoulders and ears.
d) Elbows and buttocks.

13. Which types of professional will help with oral health care?

    1) Hygienists.
    2) Dentists.
    3) Podiatrists.
    4) Phlebotomists.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

14. What are the common signs of a fungal toenail infection?

a) Bruised, split nails.
b) Yellow, crumbly nails.
c) Severe in-growing of the nails.
d) Severe overgrowth of the nails.

15. What is the **most** important reason for individuals to maintain a balanced diet?

a) To avoid contact with potential illnesses.
b) To improve personal appearance.
c) To develop personal relationships.
d) To support the body to function properly.
16. What is the **most** important reason for an individual to consider an advance plan in relation to their own death?

   a) To ensure the setting can manage the costs of carrying out the personal plan.
   b) To allow their wishes to be catered for if they are too unwell to make their own decisions.
   c) To ensure the care setting where the individual lives can review the plan in advance.
   d) To allow others to change those plans later without need for the individual’s consent.

17. Which is the **most** appropriate assistive aid to support an individual who is unable to speak?

   a) Audio player.
   b) Picture board.
   c) Screen magnifier.
   d) Hearing aid.

18. Which is the **most** common cause for loss of the sense of touch?

   a) Stroke.
   b) Dementia.
   c) Glaucoma.
   d) Tinnitus.

19. What is an **early** sign of dementia?

   a) Always being tired.
   b) Concentration loss.
   c) Low blood sugar levels.
   d) Increased frequency of urination.

20. What is a potential **behavioural** indicator that suggests someone may be misusing substances?

   a) Increased sensitivity to light.
   b) Constricted pupils.
   c) Dramatic weight loss.
   d) Changes in personality.
21. What is the **main** purpose of a job description?

a) To show the accountability of an employer.
b) To list the legal requirements of an employee.
c) To outline the overall responsibilities of a role.
d) To manage staff disciplinary actions.

22. Which of the following is covered by the code of conduct and professional practice for the health and social care sector?

a) Always reporting disclosed personal information.
b) Promoting the rights and interests of individuals.
c) Protecting own personal well-being in care settings.
d) Controlling involvement of other care professionals.

23. Arthur is an individual that Lisa cares for. He tells Lisa that one of her colleagues has been visiting him for his half hour call, but only staying for around ten minutes. Arthur is upset by this, but does not wish to get Lisa’s colleague into trouble, so asks her not to say anything.

What is the **best** course of action for Lisa to take in this scenario?

a) Wait for a short time and see if the situation improves.
b) Write it in the daily records that workers need to complete all visits.
c) Speak to the colleague in question to find out what is going on.
d) Record the information given and pass to a manager immediately.

24. What is **most likely** to promote effective team working in a care setting?

a) Ensure new team members update all personal plans.
b) Record all observations in a personal reflective diary.
c) Provide feedback to an individual’s family and friends.
d) Pass information to other team members consistently.

25. Why is co-production important when working in partnership with others?

a) To make the service cheaper to deliver.
b) To improve the reputation of the service.
c) To meet the requirements of current safety legislation.
d) To ensure a positive outcome for the individual accessing care.
26. Which legislation relates to the storing of information?

a) General Data Protection Regulation.
b) Control of Substances Hazardous to Health.
c) Lifting Operations and Lifting Equipment Regulations.
d) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

27. Which is the **most** important when recording information?

a) Facts.
b) Ideas.
c) Opinions.
d) Judgements.

28. Greg has received a social media ‘friend request’ from one of the individuals he supports.

What is the **best** action for Greg to take with the request?

a) Ignore it and ask all colleagues to do the same.
b) **Explain to the individual that they are not able to accept.**
c) Decline it and amend his security settings to the highest.
d) Accept it but not post any comments about work from now on.

29. What are potential signs of an individual affected by **physical** abuse?

1) Unexplained bruising.
2) Lacks money to buy essentials.
3) Difficulties making friends.
4) Changes in behaviour.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

30. Which is a recognised category of abuse?

a) Social.
b) Structural.
c) Emotional.
d) Educational.
31. What is the **most** important reason for working in a person centred way in a care setting?

a) To uphold the rights of individuals receiving care.
b) To meet current health and safety requirements.
c) To increase equality and diversity in the care setting.
d) To promote a feeling of community within the care setting.

32. Why may the use of an advocate need to be considered in a safeguarding case regarding an adult at risk?

a) To advise the best course of action for the individual.
b) To make all decisions on the individual’s behalf.
c) To support the individual say what they want and represent their interests.
d) To make sure the views of the individual’s friends and family are prioritised.

33. Which identifies a **grooming behaviour** that a potential abuser might use?

a) Regularly updating their social media accounts.
b) Reporting the use of illegal substances and alcohol.
c) Using secrets to control and frighten others.
d) Spending excessive amounts of time on gaming consoles.

34. What should be **avoided** if potential harm or abuse is suspected?

a) Reporting concerns.
b) Use of active listening.
c) Use of leading questions.
d) Recording details of disclosure.

35. Which is the **most likely potential** barrier to raising concerns about suspected abuse?

a) The increase in paperwork.
b) Not having enough funds to raise a case.
c) Lack of understanding of policies and processes.
d) Reduced time available for providing services.

36. Which one of the following would be raised by a ‘whistleblower’?

a) A personal family problem.
b) An incident of unsafe practice.
c) A change to a policy or procedure.
d) An argument between work colleagues.
37. A visitor arrives at a care setting and says that he is from the local authority. When asked for identification, he is unable to provide any.

What is the **most** appropriate course of action to take in this scenario?

a) Refuse to let him in, close the door and find the manager.
b) Refuse to let him in unless he shows his driving licence.
c) Allow him in and tell him to go and find the manager.
d) Allow him in but make a note of his name and contact details.

38. Which of the following relates to fire safety training for employees?

a) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.
b) Lifting Operations and Lifting Equipment Regulations.
c) The Regulatory Reform (Fire Safety) order 2005.
d) Control of Substances Hazardous to Health.

39. Dewi needs to support an individual to move from a chair in the lounge to a wheelchair.

What is the **first** step when preparing to move the individual?

a) Seek help from others.
b) Put on personal protective equipment.
c) Source manual handling equipment.
d) Consider the task to be completed.

40. Which of the following is caused by bacteria?

a) E-coli infection.
b) Measles.
c) Scabies.
d) Athlete’s foot.

41. What is an **employer’s** responsibility in relation to infection control?

a) To complete weekly risk assessments.
b) To develop new policies and procedures daily.
c) To report every illness that occurs to the local authority.
d) To provide workers with appropriate personal protective equipment.
42. Which legislation requires that an outbreak of norovirus is reported to Public Health Wales?

a) Lifting Operations and Lifting Equipment Regulations.
b) Control of Substances Hazardous to Health.
c) Health and Safety at Work Act.
d) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

43. Which is the best way to store food waste in a kitchen?

a) In a recycled plastic carrier bag.
b) In a plastic container on the floor.
c) In a lined bin with a tight-fitting lid.
d) In a metal open-topped recycling bin.

44. Ahmed needs to clean one of the bathrooms in his care setting. When looking for supplies the only thing Ahmed can find is an old bottle of what seems to be cleaning solution but the lid does not fit very well and the label has peeled away.

What is the first action that Ahmed should take in this scenario?

a) Label the bottle as cleaning solution, record and report.
b) Dispose of the bottle and its contents safely, record and report.
c) Use a small amount of the solution on a test area.
d) Buy a different cleaning solution using his own money.

45. Freddie notices that his colleague Lucia doesn’t seem herself. She is very irritable and has been snapping at other colleagues.

What is the first action Freddie should take?

a) Tell Lucia to go home and pull herself together.
b) Tell Lucia that it will be okay and that things will work out.
c) Chat to Lucia to find out what is wrong to see if he can help.
d) Arrange a formal meeting to express his concerns to Lucia’s manager.
MARK SCHEME - Level 2 Health and Social Care: Core Qualification (Adults)

The following table shows the correct answer key per question within the test; plus the unit and assessment criteria reference that each question relates to.

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**Total : 45 marks**

Pass mark 33/45.
Level 2 Health and Social Care: Core Qualification

External Assessment

Level 2 Health & Social Care: Core (Children and Young People)

**SAMPLE**

**Duration**
You have **1 hour 15 minutes** to complete this assessment

**You should have the following for this assessment**
- a multiple choice answer sheet
- a pen with black or blue ink

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![Answer Sheet Example](image)

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![Answer Sheet Example](image)

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![Answer Sheet Example](image)

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- Any calculations or rough working can be done on the question paper.
- Attempt all questions. If you find a question difficult, leave it and return to it later.

This paper contains **45** questions. Answer them using the ‘boxes’ numbered 1 to 45 on the answer sheet.
1. How does the Social Services and Well-being (Wales) Act aim to support rights-based approaches for children and young people?

a) It promotes voice and control.
b) It defines the active offer.
c) It identifies protected characteristics.
d) It ensures best interest decisions are made.

2. What would an independent advocate do to support a child or young person?

1) Help them express their views.
2) Help them make informed choices.
3) Give them advice on the best options.
4) Tell them what actions they should take.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

3. What are benefits of a child centred approach to learning?

1) Children only play on their own.
2) Children learn at their own rate.
3) Children can express themselves.
4) Children do what they are told.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

4. James is a child with cerebral palsy. The children in the setting are going to play games outside and a care and support worker says James will not be able to take part in the group games and suggests he stays inside with another worker to play.

Which of these terms is demonstrated in the scenario?

a) Equality.
b) Diversity.
c) Inclusion.
d) Discrimination.
5. Which of the following is the most important for workers to consider when encouraging individual children to participate in activities and take positive risks?

a) The experience level of the staff and gender ratio.
b) The number of children in the group and their ages.
c) The children’s abilities, ages and stages of development.
d) The number of trained staff available to support.

6. Which of the following best describes relationship centred working?

a) Making friends with children from different age groups.
b) Going to regular meetings with all the professionals who support children.
c) Developing positive relationships with other workers across a range of care settings.
d) Working with children to form positive relationships when providing support.

7. The parent of a young person that Caroline supports asks for her personal telephone number so they can call her if they need her help when she is off duty.

What is the best course of action for Caroline to take in this scenario?

a) Give the number but ask that it is not passed on to others.
b) Refuse, but provide a personal email address instead.
c) Give the number but state only to call at certain times.
d) Refuse, and explain they can contact her on a work number.

8. Which of the following is a key principle of the More than just words/Mwy na Geiriau initiative?

a) To provide Welsh language options before English ones.
b) To ensure care services actively provide Welsh language options.
c) To provide free Welsh translation services in all care settings.
d) To ensure care services only use workers who speak both Welsh and English.

9. Linda is a child who displays challenging behaviours. On a few occasions, restrictive interventions have been needed to ensure her safety and that of others. Workers in the setting are anxious to reduce the need to use restraint.

Which of these will best support this aim?

a) Plan activities to meet Linda’s individual needs.
b) Exclude Linda from activities when she becomes angry.
c) Treat Linda the same as the other children at all times.
d) Look at what makes other children angry.
10. What term is defined by the following description?

'Being healthy, feeling good about your life, feeling safe and being able to learn new things as well as being able to grow up happy and being looked after'.

a) Welfare.
b) Well-being.
c) The active offer.
d) Rights-based approach.

11. Which will have a **positive** impact on child development?

1) Limited diet.
2) Physical ill-health.
3) Physical exercise.
4) Unstructured play.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

12. Which statement describes the social model of disability being applied?

a) Ryan playing by himself as he can’t see the other children.
b) Christine being able to go to dance class as her parents pay for her funding.
c) Julie being allowed to sit and watch parachute play as she is in a wheelchair.
d) Rashid having access to books with enlarged text and pictures as he is partially sighted.

13. Which of these is a feature of a positive **physical environment**?

a) High staff ratios.
b) Regular appraisals.
c) Regulated temperatures.
d) Up-to-date safety policies.

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a) Environmental play.
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1) Preventing slips and trips.
2) Building positive resilience.
3) Developing life skills.
4) Reducing conflict with peers.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

16. Ben is a child with delayed speech and language skills compared to other children of his age.

Which other area of Ben’s development is most likely to be affected by his delayed speech and language skills?

a) Social development.
b) Physical development.
c) Cognitive development.
d) Cultural development.

17. What value is promoted by providing extra support to children with additional needs?

a) Diversity.
b) Respect.
c) Inclusion.
d) Co-operation.

18. Which of these organisations would be able to prescribe medication for children?

a) MIND.
b) GP surgery.
c) NHS Choices.
d) Local authority.
19. What is the **most** important consideration when supporting children with their personal care routines?

a) Respect their privacy.
b) Provide unisex toilet areas.
c) Dispose of soiled clothes quickly.
d) Provide personal protective equipment.

20. How many portions of fruit and vegetables per day is recommended in the Eatwell Guide?

a) 3.
b) 5.
c) 6.
d) 9.

21. What is the **main** purpose of a job description?

a) To show the accountability of an employer.
b) To list the legal requirements of an employee.
c) To outline the overall requirements of a role.
d) To manage staff disciplinary actions.

22. Which of the following is covered by the code of conduct and professional practice for the health and social care sector?

a) Always reporting disclosed personal information.
b) Promoting the rights and interests of individuals.
c) Protecting own personal well-being in care settings.
d) Controlling involvement of other care professionals.

23. Geraint is a young person who Tamsin cares for. He tells Tamsin that one of her colleagues has been using bad language around him. He is upset by this and wants it to stop, but does not wish to get Tamsin's colleague into trouble, so asks her not to say anything.

**What is the **best** course of action for Tamsin to take in this scenario?**

a) Wait and see if the situation improves.
b) Write about the situation in the daily records.
c) Report the situation to a manager immediately.
d) Speak to the colleague to find out what is going on.
24. What is **most likely** to promote effective team working in a care setting?

a) Ensure new team members update all personal plans.
b) Record all observations in a personal reflective diary.
c) Provide feedback to an individual’s family and friends.
d) Pass information to other team members consistently.

25. Why is co-production important when working in partnership with others?

a) To make the service cheaper to deliver.
b) To meet the requirements of current safety legislation.
c) To improve the reputation of children and young peoples’ settings.
d) To ensure positive outcomes for the child or young person accessing care.

26. Which legislation relates to the storing of information?

a) Lifting Operations and Lifting Equipment Regulations.
b) Control of Substances Hazardous to Health.
c) General Data Protection Regulation.
d) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

27. Which is the **most** important when recording information?

a) Facts.
b) Ideas.
c) Opinions.
d) Judgements.

28. A care and support worker receives a social media ‘friend request’ from the parent of a child they support. What is the **best** action to take with the request?

a) Ignore it and ask all colleagues to do the same.
b) Decline it and explain it is not professional to accept.
c) Decline it and amend security settings to the highest.
d) Accept but not post any comments about work from now on.
29. What are potential signs of a young person being affected by **physical abuse**?

1) Unexplained bruising.
2) Lacks money to buy essentials.
3) Difficulties making friends.
4) Changes in behaviour.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

30. Which is a recognised category of abuse?

a) Social.
b) Structural.
c) Emotional.
d) Educational.

31. What is the **most** important reason for working in a child centred way in a care setting?

a) To uphold the rights of children accessing care and support.
b) To meet current health and safety requirements.
c) To increase equality and diversity in the care setting.
d) To promote a feeling of community within the care setting.

32. What is the role of an independent advocate where there is a safeguarding concern related to a young person who lives in a residential care setting?

a) To decide the best outcome for the young person.
b) To state their view on the young person’s situation.
c) To prioritise the young person’s family or carers views and needs.
d) To support the young person’s voice and represent their interests.

33. Which identifies a **grooming behaviour** that a potential abuser might use?

a) Regularly updating their social media accounts.
b) Reporting the use of illegal substances and alcohol.
c) Using secrets to control and frighten others.
d) Spending excessive amounts of time on gaming consoles.
34. What should be avoided if potential harm or abuse is suspected?

a) Reporting concerns.
b) Use of active listening.
c) Use of leading questions.
d) Recording details of disclosure.

35. Which is the most likely potential barrier to raising concerns about suspected abuse?

a) The increase in paperwork.
b) Not having enough funds to raise a case.
c) Lack of understanding of policies and processes.
d) Reduced time available for providing services.

36. Which one of the following would be raised by a ‘whistleblower’?

a) A personal family problem.
b) An incident of unsafe practice.
c) A change to a policy or procedure.
d) An argument between work colleagues.

37. A visitor arrives at a children’s care setting and says that he is from the local authority. When asked for identification, he is unable to provide any.

What is the most appropriate course of action to take in this scenario?

a) Refuse to let him in, close the door and find the manager.
b) Refuse to let him in unless he shows his driving licence.
c) Allow him in and tell him to go and find the manager.
d) Allow him in but make a note of his name and contact details.

38. Which of the following relates to fire safety training for employees?

a) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.
b) Lifting Operations and Lifting Equipment Regulations.
c) The Regulatory Reform (Fire Safety) order 2005.
d) Control of Substances Hazardous to Health.
39. What is the **first** action to take when preparing to support a young person move from a chair to a wheelchair?

a) Put on personal protective equipment.
b) Check the personal plan.
c) Check the equipment.
d) Seek help from others.

40. Which of the following is caused by bacteria?

a) E-coli infection.
b) Measles.
c) Scabies.
d) Athlete’s foot.

41. What is an employment’s responsibility in relation to infection control?

a) To complete weekly risk assessments.
b) To develop new policies and procedures daily.
c) To report every illness that occurs to the local authority.
d) To provide workers with appropriate personal protective equipment.

42. Which legislation requires that an outbreak of norovirus is reported to Public Health Wales?

a) Health and Safety at Work Act.
b) Control of Substances Hazardous to Health.
c) Lifting Operations and Lifting Equipment Regulations.
d) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

43. Which is the **best** way to store food waste in a kitchen?

a) In a recycled plastic carrier bag.
b) In a plastic container on the floor.
c) In a lined bin with a tight-fitting lid.
d) In a metal open-topped recycling bin.
44. Ahmed needs to clean one of the bathrooms in his care setting. When looking for supplies the only thing Ahmed can find is an old bottle of what seems to be cleaning solution but the lid does not fit very well and the label has peeled away.

What is the **first** action that Ahmed should take in this scenario?

a) Label the bottle as cleaning solution, record and report.  
b) Dispose of the bottle and its contents safely, record and report.  
c) Use a small amount of the solution on a test area.  
d) Buy a different cleaning solution using his own money.

45. Freddie notices that his colleague Lucia doesn’t seem herself. She is very irritable and has been snapping at other colleagues at work.

What is the **first** action Freddie should take in this scenario?

a) Tell Lucia to go home and pull herself together.  
b) Tell Lucia that it will be okay and that things will work out.  
c) Chat to Lucia to find out what is wrong to see if he can help.  
d) Arrange a formal meeting to express his concerns to Lucia’s manager.
MARK SCHEME - Level 2 Health and Social Care: Core Qualification (Children and Young People)
The following table shows the correct answer key per question within the test; plus the unit and assessment criteria reference that each question relates to.

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Total: 45 marks

Pass mark 33/45.
Level 2 Health and Social Care: Core Qualification

External Assessment

Level 2 Health & Social Care: Core (Adults & Children and Young People)

**SAMPLE**

**Duration**
You have **1 hour 45 minutes** to complete this assessment

**You should have the following for this assessment**
- a multiple choice answer sheet
- a pen with black or blue ink

---

This question paper is the property of the City and Guilds of London Institute and is to be returned after completion of the assessment.

Read the following notes before you answer any questions
- **You must** use a pen with black or blue ink to complete all parts of the answer sheet.
- Check that you have the correct answer sheet for the **test**.
- Check that your name and candidate details are printed correctly at the top of your answer sheet.
- Inform the invigilator if your name or **test** details are not correct.
- Each question shows **four** possible answers (lettered ‘a’, ‘b’, ‘c’ and ‘d’); only one is correct.
- Decide which one is correct and mark your answer on the **answer sheet** with your pen.

For example if you decide ‘a’ is correct, mark your answer like this

![101] (b) (c) (d)

If you want to change your answer, cancel your first choice by filling in the ‘cancel’ box below the circle like this

![101] (b) (c) (d)

Then mark the answer which you have now decided is correct. For example if you now decide ‘c’ is correct, mark your answer like this

![101] (b) (c) (d)

Any other marks on the form may invalidate some of your answers.
- Any calculations or rough working can be done on the question paper.
- Attempt all questions. If you find a question difficult, leave it and return to it later.

This paper contains 65 questions. Answer them using the ‘boxes’ numbered 1 to 65 on the answer sheet.
1. What is the **most** important element of person centred care planning?

   a) To give the individual access to a complaints process.
   b) To prevent the individual from deciding on the plan by themselves.
   c) To provide the individual with information on support available.
   d) To ensure the individual remains central to the plan that affects them.

2. How does the Social Services and Well-being (Wales) Act aim to support rights-based approaches?

   a) It promotes voice and control.
   b) It defines the active offer.
   c) It identifies protected characteristics.
   d) It ensures best interest decisions are made.

3. What term is defined by the following description?

   ‘Involving people and communities in the design and delivery of services. Doing things with, rather than doing things to, people.’

   a) Well-being.
   b) Co-production.
   c) Multi-agency working.
   d) Early intervention prevention.

4. What term is defined by the following description?

   ‘Treating everyone with fairness and respect and recognising the needs of individuals.’

   a) Equality.
   b) Inclusion.
   c) Judgement.
   d) Discrimination.

5. What is a ‘best interest’ decision based on?

   a) The total cost to the service.
   b) Views and opinions of staff members.
   c) Assessment of an individual’s mental capacity.
   d) Views and wishes of an individual's family.
6. When may it be suitable for a care and support worker to share personal information about themselves, in line with professional boundaries, when providing care to individuals?

   a) To ensure person centred care.
   b) To promote relationship centred working.
   c) To increase the benefits of co-production.
   d) To meet data protection legislation.

7. Gillian has a terminal illness and tells her care and support worker John that she is struggling to come to terms with her own death as she has no religious belief.

   What is an unacceptable way for John to respond to Gillian in this scenario?

   a) Arrange pastoral support for Gillian with her permission.
   b) Ask Gillian if she would like to speak to a palliative nurse or advocate.
   c) Express his beliefs around dying and contact her family to support Gillian.
   d) Listen with empathy to Gillian’s concerns and report the incident to a manager.

8. Which of the following is a key principle of the More than just words/Mwy na Geiriau initiative?

   a) To provide Welsh language options before English ones.
   b) To ensure care services actively provide Welsh language options.
   c) To provide free Welsh translation services in all care settings.
   d) To ensure care services only use workers who speak both Welsh and English.

9. Which of the following is most likely to reduce the need for restrictive practice?

   a) Treating all individuals the same.
   b) Requesting feedback on a monthly basis.
   c) Controlling the range of resources available to individuals.
   d) Supporting individuals to engage in activities that are important to them.

10. Which legislation supports rights based approaches for children and young people?

    a) Health and Safety at Work Act.
    b) UN Convention of the Rights of the Child.
    c) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.
    d) Control of Substances Hazardous to Health.
11. What would an independent advocate do to support a child or young person?

1) Help them express their views.
2) Help them make informed choices.
3) Give them advice on the best options.
4) Tell them what actions they should take.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

12. What are benefits of a child centred approach to learning?

1) Children only play on their own.
2) Children learn at their own rate.
3) Children can express themselves.
4) Children do what they are told.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

13. James is a child with cerebral palsy. The children in the setting are going to play games outside and a care and support worker says James will not be able to take part in the group games and suggests he stays inside with another worker to play.

Which of these terms is demonstrated in the scenario?

a) Equality.
b) Diversity.
c) Inclusion.
d) Discrimination.

14. Which of the following is the most important for workers to consider when encouraging individual children to participate in activities and take positive risks?

a) The experience level of the staff and gender ratio.
b) The number of children in the group and their ages.
c) The children’s abilities, ages and stages of development.
d) The number of trained staff available to support.
15. Which of the following **best** describes relationship centred working?

a) Making friends with children from different age groups.
b) Going to regular meetings with all the professionals who support children.
c) Developing positive relationships with other workers across a range of care settings.
d) Working with children to form positive relationships when providing support.

16. The parent of a young person that Caroline supports asks for her personal telephone number so they can call her if they need her help when she is off duty.

What is the **best** course of action for Caroline to take in this scenario?

a) Give the number but ask that it is not passed on to others.
b) Refuse, but provide a personal email address instead.
c) Give the number but state only to call at certain times.
d) Refuse, and explain they can contact her on a work number.

17. What term is defined by the following description?

‘Providing a service in Welsh without someone having to ask for it.’

a) Active offer.
b) Duty of care.
c) Informed choice.
d) Active participation.

18. Linda is a child who displays challenging behaviours. On a few occasions, restrictive interventions have been needed to ensure her safety and that of others. Workers in the setting are anxious to reduce the need to use restraint.

Which of these will **best** support this aim?

a) Plan activities to meet Linda’s individual needs.
b) Exclude Linda from activities when she becomes angry.
c) Treat Linda the same as the other children at all times.
d) Look at what makes other children angry.

19. Which factor is **most likely** to help promote the health and well-being of individuals?

a) Reducing alcohol intake.
b) Restricting social contact.
c) Regularly changing environment.
d) Relying on others for financial support.
20. Which lifestyle factor is **most** likely to contribute to difficulties with continence?

   a) Over eating.
   b) Indigestion.
   c) Excessive weight loss.
   d) Poor physical mobility.

21. Which parts of the body are **most** likely to be affected by pressure ulcers?

   a) Scalp and neck.
   b) Stomach and knees.
   c) Shoulders and ears.
   d) Elbows and buttocks.

22. Which types of professional will help with oral health care?

   1) Hygienists.
   2) Dentists.
   3) Podiatrists.
   4) Phlebotomists.

   a) 1 and 2.
   b) 2 and 3.
   c) 3 and 4.
   d) 4 and 1.

23. What are the common signs of a fungal toenail infection?

   a) Bruised, split nails.
   b) Yellow, crumbly nails.
   c) Severe in-growing of the nails.
   d) Severe overgrowth of the nails.

24. What is the **most** important reason for individuals to maintain a balanced diet?

   a) To avoid contact with potential illnesses.
   b) To improve personal appearance.
   c) To develop personal relationships.
   d) To support the body to function properly.
25. What is the **most** important reason for an individual to consider an advance plan in relation to their own death?

a) To ensure the setting can manage the costs of carrying out the personal plan.  
b) To allow their wishes to be catered for if they are too unwell to make their own decisions.  
c) To ensure the care setting where the individual lives can review the plan in advance.  
d) To allow others to change those plans later without need for the individual’s consent.

26. Which is the **most** appropriate assistive aid to help an individual who is unable to speak?

a) Audio player.  
b) Picture board.  
c) Screen magnifier.  
d) Hearing aid.

27. Which is the **most** common cause for loss of the sense of touch?

a) Stroke.  
b) Dementia.  
c) Glaucoma.  
d) Tinnitus.

28. What is an **early** sign of dementia?

a) Always being tired.  
b) Concentration loss.  
c) Low blood sugar levels.  
d) Increased frequency of urination.

29. What is a potential **behavioural** indicator that suggests someone may be misusing substances?

a) Increased sensitivity to light.  
b) Constricted pupils.  
c) Dramatic weight loss.  
d) Changes in personality.
30. What term is defined by the following description?

'Being healthy, feeling good about your life, feeling safe and being able to learn new things as well as being able to grow up happy and being looked after'.

a) Welfare.  
b) Well-being.  
c) The active offer.  
d) Rights-based approach.

31. Which will have a **positive** impact on child development?

1) Limited diet.  
2) Physical ill-health.  
3) Physical exercise.  
4) Unstructured play.

a) 1 and 2.  
b) 2 and 3.  
c) 3 and 4.  
d) 4 and 1.

32. Which statement describes the social model of disability being applied?

a) Ryan playing by himself as he can't see the other children.  
b) Christine being able to go to dance class as her parents pay for her funding.  
c) Julie being allowed to sit and watch parachute play as she is in a wheelchair.  
d) Rashid having access to books with enlarged text and pictures as he is partially sighted.

33. Which of these is a feature of a positive **physical environment**?

a) High staff ratios.  
b) Regular appraisals.  
c) Regulated temperature.  
d) Up-to-date safety policies.

34. What type of play mixes fun activities with learning experiences and ensures a specific outcome?

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   1) Preventing slips and trips  
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Which other area of Ben’s development is most likely to be affected by his delayed speech and language skills?

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   b) GP surgery.  
   c) NHS Choices.  
   d) Local authority.
39. What is the **most** important consideration when supporting children with their personal care routines?

   a) Respect their privacy.
   b) Provide unisex toilet areas.
   c) Dispose of soiled clothes quickly.
   d) Provide personal protective equipment.

40. How many portions of fruit and vegetables per day is recommended in the Eatwell Guide?

   a) 3.
   b) 5.
   c) 6.
   d) 9.

41. What is the **main** purpose of a job description?

   a) To show the accountability of an employer.
   b) To list the legal requirements of an employee.
   c) To outline the overall responsibilities of a role.
   d) To manage staff disciplinary actions.

42. Which of the following is covered by the code of conduct and professional practice for the health and social care sector?

   a) Always reporting disclosed personal information.
   b) Promoting the rights and interests of individuals.
   c) Protecting own personal well-being in care settings.
   d) Controlling involvement of other care professionals.

43. Arthur is an individual that Lisa cares for. He tells Lisa that one of her colleagues has been visiting him for his half hour call, but only staying for around ten minutes. Arthur is upset by this, but does not wish to get Lisa’s colleague into trouble, so asks her not to say anything.

   **What is the best** course of action for Lisa to take in this scenario?

   a) Wait for a short time and see if the situation improves.
   b) Write it in the daily records that workers need to complete all visits.
   c) Speak to the colleague in question to find out what is going on.
   d) Record the information given and pass to a manager immediately.
44. What is **most likely** to promote effective team working in a care setting?

a) Ensure new team members update all personal plans.
b) Record all observations in a personal reflective diary.
c) Provide feedback to an individual’s family and friends.
d) Pass information to other team members consistently.

45. Why is co-production important when working in partnership with others?

a) To make the service cheaper to deliver.
b) To meet the requirements of current safety legislation.
c) To improve the reputation of children and young peoples’ settings.
d) To ensure positive outcomes for the child or young person accessing care.

46. Which legislation relates to the storing of information?

a) General Data Protection Regulation.
b) Control of Substances Hazardous to Health.
c) Lifting Operations and Lifting Equipment Regulations.
d) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

47. Which is the **most** important when recording information?

a) Facts.
b) Ideas.
c) Opinions.
d) Judgements.

48. Greg has received a social media ‘friend request’ from one of the individuals he supports.

What is the **best** action for Greg to take with the request?

a) Ignore it and ask all colleagues to do the same.
b) Explain to the individual that they are not able to accept.
c) Decline it and amend his security settings to the highest.
d) Accept it but not post any comments about work from now on.
49. What are potential signs of an individual affected by **physical** abuse?

1) Unexplained bruising.
2) Lacks money to buy essentials.
3) Difficulties making friends.
4) Changes in behaviour.

a) 1 and 2.
b) 2 and 3.
c) 3 and 4.
d) 4 and 1.

50. Which is a recognised category of abuse?

a) Social.
b) Structural.
c) Emotional.
d) Educational.

51. Which of the following is the **most** important reason for working in a child centred way in care settings?

a) To uphold the rights of children accessing care and support.
b) To meet current health and safety requirements.
c) To increase equality and diversity in the care setting.
d) To promote a feeling of community within the care setting.

52. What is the role of an independent advocate where there is a safeguarding concern related to a young person who lives in a residential care setting?

a) To decide the best outcome for the young person.
b) To state their view on the young person’s situation.
c) To prioritise the young person’s family or carers views and needs.
d) To support the young person’s voice and represent their interests.

53. Staff in a residential care home setting for children and young people are being trained on grooming behaviours.

Which is a behaviour a potential abuser may use?

a) Regularly updating their social media accounts.
b) Reporting the use of illegal substances and alcohol.
c) Using secrets to control and frighten others.
d) Spending excessive amounts of time on gaming consoles.
54. Jo is a care and support worker in a domiciliary care role, and suspects an individual she supports is at risk of potential abuse.

Which of the following should be avoided by Jo?

a) Reporting the concern.
b) Use of active listening.
c) Use of leading questions.
d) Recording details of disclosure.

55. Which is the most likely potential barrier to care and support workers in raising concerns about suspected abuse?

a) The increase in paperwork.
b) Not having enough funds to raise a case.
c) Lack of understanding of policies and processes.
d) Reduced time available for providing services.

56. Which of the following would be raised by a ‘whistleblower’ in a residential care setting?

a) A personal family problem.
b) An incident of unsafe practice.
c) A change to a policy or procedure.
d) An argument between work colleagues.

57. A visitor arrives at a children's care setting and says that he is from the local authority. When asked for identification, he is unable to provide any.

What is the most appropriate course of action to take in this scenario?

a) Refuse to let him in, close the door and find the manager.
b) Refuse to let him in unless he shows his driving licence.
c) Allow him in and tell him to go and find the manager.
d) Allow him in but make a note of his name and contact details.

58. Which of the following relates to fire safety training for employees?

a) Lifting Operations and Lifting Equipment Regulations.
b) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.
c) The Regulatory Reform (Fire Safety) order 2005.
d) Control of Substances Hazardous to Health.
59. What is the first action to take when preparing to support a young person move from a chair to a wheelchair?

a) Put on personal protective equipment.
b) Check the personal plan.
c) Check the equipment.
d) Seek help from others.

60. Which of the following is caused by bacteria?

a) E coli infection.
b) Measles.
c) Scabies.
d) Athlete’s foot.

61. What is an employer’s responsibility in relation to infection control?

a) To complete weekly risk assessments.
b) To develop new policies and procedures daily.
c) To report every illness that occurs to the local authority.
d) To provide workers with appropriate personal protective equipment.

62. Which legislation requires that an outbreak of norovirus is reported to Public Health Wales?

a) Lifting Operations and Lifting Equipment Regulations. 
b) Control of Substances Hazardous to Health.
c) Health and Safety at Work Act.
d) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.

63. Which is the best way to store food waste in a kitchen?

a) In a recycled plastic carrier bag.
b) In a plastic container on the floor.
c) In a lined bin with a tight-fitting lid.
d) In a metal open-topped recycling bin.
64. Ahmed needs to clean one of the bathrooms in his care setting. When looking for supplies the only thing Ahmed can find is an old bottle of what seems to be cleaning solution but the lid does not fit very well and the label has peeled away.

What is the first action that Ahmed should take in this scenario?

a) Label the bottle as cleaning solution, record and report.
b) Dispose of the bottle and its contents safely, record and report.
c) Use a small amount of the solution on a test area.
d) Buy a different cleaning solution using his own money.

65. Freddie notices that his colleague Lucia doesn’t seem herself. She is very irritable and has been snapping at other colleagues at work.

What is the first action Freddie should take?

a) Tell Lucia to go home and pull herself together.
b) Tell Lucia that it will be okay and that things will work out.
c) Chat to Lucia to find out what is wrong to see if he can help.
d) Arrange a formal meeting to express his concerns to Lucia’s manager.
MARK SCHEME - Level 2 Health and Social Care: Core Qualification (Adults & Children and Young People)

The following table shows the correct answer key per question within the test; plus the unit and assessment criteria reference that each question relates to.

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Total: 65 marks

Pass mark 48/65.
Level 2 Health and Social Care: Core Qualification

SAMPLE INTERNAL ASSESSMENT

Level 2 Health and Social Care: Core (Adults)

Assessor Pack

Internal assessment (001/003) - David

This assessor pack is comprised of:
- instructions and guidance for the assessor
- a copy of the candidate pack
- the mark scheme

Instructions
This is a **summative assessment** to assess Units 001 and 003. Candidates should only attempt this assessment when all the learning of these units has been completed.

The assessment outcome is **pass/fail**. There is a total of 30 marks available, **the pass mark for this assessment is 22**.

The assessment is comprised of:
- a pre-release scenario that must be provided to the candidate two weeks prior to the assessment
- a set of questions/tasks that will be sat by the candidate. The candidate has 60 minutes to complete the questions/tasks.

The assessment must be:
- internally marked, by appropriately qualified staff, using the Marking Schemes provided. Please see the Specification for details of staff requirements
- internally quality assured, by appropriately qualified staff
- externally quality assured/verified by City & Guilds
- compliant with the **Assessment Conditions** below.

Note, where additional valid responses have been accepted by the marker for any question; these should be recorded and kept for sharing with the external quality assurer. This is to support standardisation across centres, and will allow additional valid responses to be added to the mark schemes at a later stage.

**Assessment conditions**

This assessment must be completed under the following conditions:

- The environment within which the assessments are completed must be controlled. There should be no interruption and/or influence whilst candidates are working on the tasks. However, whilst there is not a requirement for full or continual supervision; the centre must however be able to authenticate that the candidate’s work is their own.
- The candidate may have access to routine resources that may be available in ‘real life’ situations, for example PCs/laptops, tablets and dictionaries (including bilingual dictionaries). Mobile phones or other transmitting/receiving devices are not permitted and the candidate may not access the internet during the assessment.
- The candidate is permitted to bring notes that they have made on the pre-release scenario into the assessment. A maximum of two sides of A4 notes will be permitted. Candidates must be advised of this.
- Candidates can review and redraft evidence independently within the time controls for the assessment. Assessors should not provide input or guidance to learners during the assessment time. This includes providing formative feedback on the evidence being produced.
Level 2 Health and Social Care: Core (Adults) Qualification

Internal assessment (001/003) – David (Sample)
Candidate pack

Candidate name:
Candidate number:
Centre name:
Centre number:

Instructions to Candidates

You have 1 hour in total to complete this assessment.

The questions within this assessment are based on the pre-released scenario which will have been provided to you. A copy of the scenario is included within this pack.

- All questions are mandatory.
- Make sure you have read through the scenario and the questions carefully before you start to answer the questions.
- Some scenarios may be unfamiliar, however your responses may draw on knowledge and understanding gained through your learning and experience.
- 2 sides of A4 notes may be prepared and taken into the assessment.
- All work submitted must be entirely your own. You are not allowed to be given any help with the response you are writing throughout this assessment.
- Make sure you sign the declaration form included within this pack.
- If you complete the questions on paper, and run out of space, use continuation paper, taking care to number the question(s) correctly

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**Assessor’s Comments:**
David

Birch View is a residential care home in Wales. It caters for older people, lots of whom have dementia. Many of the individuals living in Birch View speak Welsh and the home tries to employ care and support workers who speak both Welsh and English.

Birch View aims to treat all individuals living in the home with dignity and respect and provide services that help them achieve their personal outcomes and what matters to them, for example knowing what time they like to get up and go to bed, when they like to eat their meals and the type of food that they enjoy, what their hobbies and interests are and how they would like to stay in touch with family and friends. The home is welcoming and has lots of different activities such as:

- An art club
- Singing for pleasure
- Film and book clubs
- A gardening group
- Keep fit sessions e.g. chair-based exercises

The home has an activities co-ordinator who organises the clubs and groups, she is always keen to hear from the individuals living at Birch View about their interests or what they would like to try. The activities co-ordinator has resources for the clubs and groups including computer tablets that can be used to watch films for the film club.

Birch View involves the local community in the home including:

- Visits from school children
- Weekly hairdresser
- Monthly visiting Chapel Service
- Visits from people with their pets
- Visits to events in the local town

David has recently moved into Birch View, he is 88 years old and speaks Welsh as his first language. David has been diagnosed with dementia. Until recently, David lived at home with his wife Gwen who is 85 years old. He was supported by Gwen, health and social care services and their son and daughter who both live locally, have families of their own and work full time.

David has become more confused recently, he is becoming muddled between night and day and Gwen has found him wandering outside in the middle of the night. He is struggling to access the bathroom in the house, is having difficulties with continence and has had a number of falls; after the last fall he was admitted to hospital where he was treated for minor injuries. Before he was discharged from hospital, an assessment was completed with David, Gwen, their son and daughter by social services and health professionals. This included a mental capacity and best-interest assessment.

It was agreed that it was in David’s best interest for him to move into a residential care home as it was no longer safe for him to stay at home. Gwen, their children and grandchildren visit him regularly.
David has been given a walking frame to use at Birch View but forgets to use it. Since moving into Birch View, he has become more unstable, he has fallen twice and struggles to get in and out of bed. The care and support workers have reported that he seems agitated and confused, is not sleeping well, is trying to get out of bed in the night and has little appetite.

David’s family and the care and support workers are worried that he is not settling in and is struggling more with his mobility.

Nicole is one of the care and support workers at Birch View, she has noticed that David tends to be more confused in the mornings but is clearer in the afternoons. This information has been recorded in his personal plan to support his communication.

Nicole is working with David and his family to find out more about his interests and background. Gwen tells her that before he became unwell, he was very active, walking the dog daily and gardening. She says that he loved growing vegetables and had been a vegetarian for the past 30 years. He was a history teacher and used to belong to the local history club at the library, he loved reading and enjoyed watching old war films. He spent a lot of time with the grandchildren as they were growing up, spending time with them in the garden, planting seeds and growing plants in their own little plots on his vegetable patch.

Nicole explains to Gwen that even though David’s personal plan says that he is a vegetarian, he has been choosing the meat option from the lunch time menu and then not eating it. The care and support workers are offering David vegetarian food options but he is refusing these. Nicole asks Gwen for some ideas of the type of food that David enjoyed when he was living at home as she is worried that he is not eating enough and this may be affecting him.

Nicole arranges for David to meet the activities co-ordinator in the afternoon when he is less confused and more able to express what he wants. Having spoken to Gwen and David, she thinks that he may enjoy the gardening group and film club and wonders whether they could arrange for one of his favourite war films to be shown to get him interested.
David

Question set A

1. a. Identify **three** principles of the Social Services and Well-being (Wales) Act.

   [3 marks]

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   b. Describe how **each** of these principles relate to David’s care and support.

   [3 marks]

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2. Describe **one** method used by Birch View to meet David’s communication needs.

   [1 mark]

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3. Describe **three** reasons why Nicole needed to find out more about David's interests and his background.  
[3 marks]

4. The decline in David's mobility has the potential to impact upon his well-being.
   
a. State **two** potential impacts of this on his **physical** well-being.  
   [2 marks]

   b. State **two** potential impacts on his **mental** well-being.  
   [2 marks]
5. Explain how the principles of the Mental Capacity Act have been applied in supporting David’s health and well-being. [4 marks]

6. The activities co-ordinator has introduced the use of computer tablets so individuals, including David, can benefit from watching films as part of the film club.

Identify three other potential benefits of individuals in the care home having access to computer tablets. [3 marks]
7. Identify **three** regular health checks that would be undertaken to support the physical well-being of the individuals who live at Birch View.  

[3 marks]  

8. State **three** ways the care and support team at Birch View can support individuals to ‘live well with dementia’.  

[3 marks]
9. Before moving to Birch View, David was cared for by his family at home.

Identify **three** sources of support that would have been available to David and his family related to his dementia.

[3 marks]

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## Mark Scheme – David Question Set A

<table>
<thead>
<tr>
<th>Question (spec ref)</th>
<th>Answer guide</th>
<th>Maximum marks</th>
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</table>
| 1. (a) 
(Unit 1, 1.1)    | Award 1 mark for each identified principle up to a maximum of 3 marks.  
- Voice and control  
- Prevention and early intervention  
- Well-being  
- Co-production  
- Multi agency working | 3 marks |
| 1. (b) 
(Unit 1, 1.2)    | Award 1 mark for each valid point raised per principle identified in (1a).  
A maximum of 1 mark can be achieved for each point given per principle.  
- Voice and control  
  - supports David to make decisions about his care and support  
  - supports David to say what is important to him / what matters to him  
  - supports David to say how he wants to live his life  
- Prevention and early intervention  
  - move into a residential care home before David has a major injury from a fall  
  - ensures David is supported with his mobility e.g., reminding him to use his walking frame to prevent further falls and possible deterioration in physical health  
  - awareness of life history and interests to help David feel comfortable and included in the home, e.g. seeking advice on garden group  
  - supports safeguarding (including potential abuse and taking steps to prevent neglect etc.)  
  - health checks are carried out e.g. eye health, sight and hearing checks, oral health checks, foot care checks  
- Well-being  
  - promotes aspects of David’s mental well-being  
  - promotes aspects of David’ physical well-being | 3 marks |
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<th>Question (spec ref)</th>
<th>Answer guide</th>
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<tbody>
<tr>
<td></td>
<td>o promotes aspects of David’s social well-being</td>
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<td></td>
<td>o David is supported to engage in activities that are important to him.</td>
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<tr>
<td><strong>Co-production</strong></td>
<td>o encourages David to become more involved in how he wants his care and support delivered</td>
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<td></td>
<td>o David feeds back on how he finds his service, what he likes and what could improve</td>
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<td></td>
<td>o work with David’s family to find out about his preferences, and what is important to him</td>
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<tr>
<td><strong>Multi agency working</strong></td>
<td>o promotes work between agency/groups such as health, local Social Services and the community</td>
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<td>o sharing of relevant information to ensure the best outcome could include working with health staff to ensure David’s health and care needs are met</td>
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<tr>
<td></td>
<td>o health checks and physiotherapy / occupational therapist for mobility</td>
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</table>

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.*

2. (Unit 1, 7.4) **Award 1 mark** for any method described up to a maximum of 1 mark.

- Follow personal plan to best support communication/
  Communicating with David at the best time of day when she is aware that his communication is at his best
- Ensuring the availability of Welsh speakers to communicate with David in Welsh
- Speaking with David’s family to find out his interests and engage him

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.*

3. (Unit 1, 3.3) **Award 1 mark** for each reason provided up to a maximum of 3 marks.

- To find out what matters/is important to David
- To build a positive relationship with David
- To be able to deliver person-centred care for David
- To provide David with a sense of belonging

3 marks
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<th>Answer guide</th>
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</table>
|                     | • To provide meaningful activities, to ensure David’s mental well-being  
• To maintain David’s self-esteem and sense of worth  
• To try to reduce David’s agitation / to make him feel more settled  
• To be aware of David’s likes and dislikes  
• To help improve David’s social skills/interaction with others  
• To provide mental stimulation and engagement in activities; which may improve David’s sleep routines  
• To respect David’s cultural choice/ to support him to have options that supports what matters/is important to him (e.g. supports him to maintain his choice of vegetarianism)  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* |               |
| 4.(a)               | **Award 1 mark** for each impact given up to a maximum of 2 marks.  
• Reduced mobility/more falls  
• Increased weight gain  
• Joint stiffness  
• Muscle weakening/waste  
• Management of continence  
• Constipation  
• Increased blood pressure  
• Increased risk of skin damage/pressure ulcers  
• Heart atrophies | 2 marks |
| (Unit 3, 2.5)       |              |               |
| 4.(b)               | **Award 1 mark** for each impact given up to a maximum of 2 marks.  
• Increased isolation/withdrawal  
• Increased likelihood of depression/ anxiety  
• Reduced confidence/ low self esteem  
• Reduced engagement with others / relationships may suffer e.g. with grandchildren  
• Increased confusion  
• Increased agitation  
• Increased risk of self-neglect (e.g. personal hygiene)  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 2 marks |
<p>| (Unit 3, 2.5)       |              |               |</p>
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<tr>
<th>Question (spec ref)</th>
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<th>Maximum marks</th>
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</table>
| 5. (Unit 3, 2.18)   | **Award 1 mark** for a limited response which shows little knowledge and understanding of the Principles of the Mental Capacity Act. The response does not specifically link the Principles with how they have been applied in supporting David's health and well-being.  
**Award 2 marks** for a basic response which shows some knowledge and understanding of the Principles of the Mental Capacity Act. The response may not fully link the Principles with how they have been applied in supporting David's health and well-being.  
**Award 3 marks** for a good response which shows knowledge and understanding of the Principles of the Mental Capacity Act. The response links the Principles with how they have been applied in supporting David's health and well-being.  
**Award 4 marks** for an excellent response which shows detailed knowledge and understanding of the Principles of the Mental Capacity Act. The response clearly links the Principles with how they have been applied in supporting David's health and well-being. | 4 marks |

**Answers include:**

- **Presumption of capacity**
  - *individuals being supported to make their own decisions* - people must be given all appropriate support before it is concluded that they cannot make their own decisions
  - *every adult has the right to make his or her own decisions and must be assumed to have capacity to do so unless it is proved otherwise*
  - an assessment of David's mental capacity has been carried out
  - some decisions have been made on behalf of David following the capacity assessment and best-interest decision e.g. about where he should live
  - staff member speaks to David in the afternoon when she has noticed his understanding is better and speaks to him in Welsh. Unwise decisions - individuals must retain the right to make what might be seen as eccentric or unwise decisions
  - David has been a vegetarian although has forgotten this and sometimes has eaten meat; the team are supporting
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<th>Question (spec ref)</th>
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<tr>
<td>it, or, that, he is</td>
<td>him with the option to make vegetarian choices, but would be unlikely to take meat off him if he did choose to eat it</td>
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| • Best interests | o anything done for or on behalf of people without capacity must be in their best interests  
  o David has had a best interest assessment before moving into the care home  
  o Assessment was carried out with David’s family and health and social care services, and health professionals  
  o Agreement was made between David and his family that it was in his best interest to move into a residential care home |            |
| • Least restrictive intervention | o anything done for or on behalf of people without capacity should be an option that is less restrictive of their basic needs - as long as it is still in their best interests.  
  o the decision for David to move to Birch View was a less restrictive option considering his mobility and dementia (e.g. care home not a nursing home) or encouraging use of a walking frame to maintain his mobility |            |

Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.

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<thead>
<tr>
<th>6. (Unit 3, 2.7)</th>
<th>Award 1 mark for each potential benefit identified up to a maximum of 3 marks.</th>
<th>3 marks</th>
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</thead>
</table>
| • To support communication – with family/carers/friends  
• As a visual aid for communication (e.g. choosing menu options)  
• To promote the learning of new skills  
• To keep u-to-date with news/maintain community connections  
• To encourage creativity and collaboration  
• To support the individual with opportunities to engage in areas (e.g. areas of interest, research of areas of interest) that matter/are important to them  
• To promote reminiscence activities | Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor. |        |
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<th>Question</th>
<th>Answer guide</th>
<th>Maximum marks</th>
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| 7. (Unit 3, 2.12) | **Award 1 mark** for each health check identified up to a maximum of 3 marks.  
- Weight/BMI  
- Mouth/oral care  
- Skin integrity checks  
- Hearing and eyesight checks  
- Medication reviews in conjunction with medical professional  
- Personal care – hygiene and cleanliness levels (e.g. nails)  
- Fluid intake and output  
- Food intake  
- Bowel movements / continence  
- Changes in mobility  
- Dietic advice and support  
- Access to podiatry and dentistry services  
- GP access and medicine support  
- Specialist mental health support  
- Health promotion and reablement support | 3 marks |
| 8. (Unit 3, 13.5) | **Award 1 mark** for each point up to a maximum of 3 marks.  
- Improve training and knowledge on dementia within the setting  
- Improve access to information and support for individuals and their families/carers  
- Supporting a focus on proper diagnosis  
- Enable the individual’s choice and control regarding their support, and how they feel they will be best supported  
- Adapt care and support to support what matters/is important to the individual  
- Focus on improved services  
- Treat individuals as people and not focus on the disease/illness  
- Show an active understanding that individuals experience dementia differently  
- Focus on the things individuals are still able to do i.e. focusing on their strengths  
- Promote and support engagement in a valued range of meaningful activities/experiences (vocational, domestic, personal, leisure, educational and social)  
- Support physical and mental healthcare i.e. health checks, healthy diet, access to primary/specialist healthcare | 3 marks |
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<th>Question (spec ref)</th>
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| • Support community engagement  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.*  

9. *(Unit 3, 13.10)*  
  **Award 1 mark** for each identified source of support up to a maximum of 3 marks.  
  • Assessment services / social services  
  • Community leisure/day care facilities providing activities  
  • Residential nursing care centres providing long term care  
  • GP surgeries for monitoring medication and support  
  • Third sector services (e.g. Admiral nurses; Alzheimer’s society; Dementia UK; Dementia Champions Network) providing advice and support for families  
  • Dementia specialist nurses  
  • NHS provision – information  
  • Counselling and emotional support for his family  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.*  

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<td><strong>Total unit 001: 10 marks, unit 003: 20 marks</strong></td>
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<td>30 marks</td>
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Level 2 Health and Social Care: Core (Adults)

Assessor Pack

Internal assessment (001/005) - Carla

This assessor pack is comprised of:
  * instructions and guidance for the assessor
  * a copy of the candidate pack
  * the mark scheme

Instructions

This is a summative assessment to assess Units 001 and 005. Candidates should only attempt this assessment when all the learning of these units has been completed.

The assessment outcome is pass/fail. There is a total of 30 marks available, the pass mark for this assessment is 22.

The assessment is comprised of:
  * a pre-release scenario that must be provided to the candidate two weeks prior to the assessment
  * a set of questions/tasks that will be sat by the candidate. The candidate has 60 minutes to complete the questions/tasks.

The assessment must be:
  * internally marked, by appropriately qualified staff, using the Marking Schemes provided. Please see the Specification for details of staff requirements
  * internally quality assured, by appropriately qualified staff
  * externally quality assured/verified by City & Guilds
  * compliant with the Assessment Conditions below.

Note, where additional valid responses have been accepted by the marker for any question; these should be recorded and kept for sharing with the external quality assurer. This is to support standardisation across centres, and will allow additional valid responses to be added to the mark schemes at a later stage.

Assessment conditions

This assessment must be completed under the following conditions:
• The environment within which the assessments are completed must be controlled. There should be no interruption and/or influence whilst candidates are working on the tasks. However, whilst there is not a requirement for full or continual supervision; the centre must however be able to authenticate that the candidate’s work is their own.

• The candidate may have access to routine resources that may be available in ‘real life’ situations, for example PCs/laptops, tablets and dictionaries (including bilingual dictionaries). Mobile phones or other transmitting/receiving devices are not permitted and the candidate may not access the internet during the assessment.

• The candidate is permitted to bring notes that they have made on the pre-release scenario into the assessment. A maximum of two sides of A4 notes will be permitted. Candidates must be advised of this.

• Candidates can review and redraft evidence independently within the time controls for the assessment. Assessors should not provide input or guidance to learners during the assessment time. This includes providing formative feedback on the evidence being produced.
Level 2 Health and Social Care: Core (adults) Qualification

Internal assessment (001/005) – Carla (Sample)
Candidate pack

Candidate name:
Candidate number:
Centre name:
Centre number:

Instructions to Candidates

You have 1 hour in total to complete this assessment.

The questions within this assessment are based on the pre-released scenario which will have been provided to you. A copy of the scenario is included within this pack.

- All questions are mandatory.
- Make sure you have read through the scenario and the questions carefully before you start to answer the questions.
- Some scenarios may be unfamiliar, however your responses may draw on knowledge and understanding gained through your learning and experience.
- 2 sides of A4 notes may be prepared and taken into the assessment.
- All work submitted must be entirely your own. You are not allowed to be given any help with the responses you are writing throughout this assessment.
- Make sure you sign the declaration form included within this pack.
- If you run out of space, use continuation paper, taking care to number the question(s) correctly.

<table>
<thead>
<tr>
<th>Assessor’s use only</th>
<th>Question</th>
<th>Maximum Mark</th>
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<td><strong>Total</strong></td>
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**Assessor’s Comments:**
Carla

‘The Willows’ is a residential care home in South Wales for adults, it has a good reputation for providing a friendly and warm environment and for treating people with dignity and respect. However, a recent Care Inspectorate Wales (CIW) inspection rated the home as “Requires Improvement”. An area for improvement was the standard of staffing, the inspector reported that ‘The Willows’ did not have enough ‘suitably qualified, competent and experienced staff’. The home needs to improve the support, training and supervision of new workers.

As part of the plans for improvement the registered manager has changed her processes to follow the new All Wales Health and Social Care Induction Framework (AWIF) and she has recently introduced mentoring and job shadowing for new workers.

Carla is a new member of staff at ‘The Willows’, she has been there for almost three months and is working her way through the induction framework. Carla has little experience in health and social care, before this job, she worked in a call centre.

As part of her regular supervision and review meetings, Carla is asked to reflect on her practice and any areas that she is unsure of or where she may need additional training.

The registered manager has asked George to act as Carla’s mentor for her first six months. George is an experienced care and support worker and is a respected member of the team. The manager feels that this would be a good opportunity for his continuing professional development (CPD).

Carla is enjoying her new role, she is getting to know the individuals living in The Willows well. She has been learning different methods of communication and using these to offer choices such as menus using written, visual and verbal prompts to help individuals select what they would like to eat.

Carla has observed George supporting Tudor, one of the individuals living at ‘The Willows’ to use the home’s laptop to stay in contact with his granddaughter using social media. Tudor has a hearing impairment and Carla can see that this is a good way for him to communicate with his family. Whilst supporting George, Carla talks to Tudor about this, and he asks her for her social media contact details so that he can add her to his friends. Carla thinks this will help her build a good relationship with Tudor – she knows that ‘relationship based care and support’ is one of the values of the home, so she agrees and gives Tudor her details.

Carla has a supervision with her manager and raises some concerns:

- She has observed Marco, another care and support worker, helping an individual after he had fallen off his chair when trying to get up. Marco quickly helped him up from the floor but did not check to see if he was injured. Marco is a popular member of staff and well liked for his sense of humour, he made a joke about the fall and some of the other individuals and a visitor laughed. Marco did not record or report the fall and when Carla asked him about this, he said that it was just a one off and that the individual did not usually fall.

- There was an afternoon when Carla was shadowing Marco. He gave her many tasks that he said he did not like doing. He took several long breaks and left Carla to
continue the tasks alone. Carla felt unsure as to whether she had completed these correctly so went and asked the registered manager. She also needed to support an individual to move from their bed to a chair using a hoist, she could not find Marco so asked George if he would help her.

During Carla’s supervision meeting the registered manager says she is happy with Carla’s progress and that she has had good feedback from individuals living at the home and other workers. Her manager asks Carla to reflect on her experiences. Carla raises her concerns about Marco and the manager praises her for asking for help. The manager talks about the Code of Professional Practice and how this sets out the way that workers are expected to practice. They look at this together and identify which of the standards have not been met. The manager advises Carla that she will talk to Marco about the concerns. Her manager recognises that Carla was trying to support an individual when she shared her social media contact details, but identifies that this is not good practice. She will explain to the individual that this is against the policies of the home.

The registered manager asks to meet with Marco to talk about the fall and how he left Carla on her own when she should have been shadowing him. She asks him to reflect on how these situations might not meet the standards of the Code of Professional Practice. She talks to him about how important it is that he understands his role and responsibilities, his duty of care and accountability, duty of candour and the need to keep individuals safe.
Carla

Question set A

1. Describe three ways Continuing Professional Development (CPD) supports Professional Practice in settings such as The Willows Care Home.  

   [3 marks]

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2. Carla shared her social media contact details with an individual in the care home.

   Outline three reasons why this is considered to be poor professional practice.  

   [3 marks]

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3. George uses social media to support an individual with a hearing impairment.

Outline **three** further communication methods that Carla or George might use to support other individuals with a hearing impairment.

[3 marks]

4. Carla has regular supervision meetings and is asked to reflect on her practice.

**Give three** reasons why supervision and reflective practice is important for supporting the well-being of individuals.

[3 marks]
5. Marco did not record and report that an individual had a fall.

Outline **two** reasons why this might be considered to be ineffective communication.  

[2 marks]

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6. Marco is unprofessional when he makes a joke about the individual who had a fall.

Describe **two** reasons why Marco’s behaviour is not considered to be in line with the principles and values of The Willows Care Home.

[2 marks]

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7. The registered manager reminds Marco of his accountability.

What is meant by the term accountability?

[2 marks]

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8. The registered manager has asked Carla and Marco to reflect on their practice.

a. List three methods Carla and Marco could use to help them reflect on their own practice.

[3 marks]

b. Outline three reasons why reflection is important for all members of staff in the care home.

[3 marks]
9. Give three reasons why it was important that the registered manager provided feedback to Marco regarding his practice. [3 marks]

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10. Describe three areas where Marco’s practice has breached Codes of Conduct and Professional Practice. [3 marks]

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# Mark Scheme – Carla Question Set A

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<thead>
<tr>
<th>Question (spec ref)</th>
<th>Answer guide</th>
<th>Maximum marks</th>
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</table>
| 1. (unit 5, 6.5)    | **Award 1 mark** for each point briefly described up to a maximum of 3 marks.  
- Promotes professional/best practice  
- Ensures workers are continuously increasing their knowledge/ knowledge is kept up to date  
- Ensures workers are continuously improving their practical skills/ currency of practical skills  
- Supports reflective practice  
- Supports learning and development throughout career/ supports the gaining of new knowledge/learning new skills  
- Meets minimum standards/regulator requirement  
- Supports career progression  
- Builds confidence/ competence in the workplace  
- Supports the ability to meet the needs of individuals  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 2. (unit 5, 2.5)    | **Award 1 mark** for each reason up to a maximum of 3 marks.  
- Unprofessional/crossed professional boundaries  
- Putting herself at risk – sharing personal details  
- Putting individual at risk – sharing personal details  
- Not meeting Codes of Professional Practice  
- Gives families and visitors a poor impression of the setting/ potentially damages reputation of the setting  
- Does not meet/reflect ethos of the organisation/ so has potential for disciplinary action  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 3. (unit 1, 7.5)    | **Award 1 mark** for each method outlined up to a maximum of 3 marks.  
- Visual aids/pictures | 3 marks |
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<tr>
<th>Question (spec ref)</th>
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</table>
|                     | • Use BSL/sign language  
                      • Use white boards/write it down  
                      • Reduce background noise  
                      • Ensure good use of eye contact/make sure the individual is looking at you  
                      • Hearing aid/other technology  
                      • Ensure that the light is not behind you  
                      • Talk clearly and slowly  
                      • Don’t use jargon  
                      
  *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | | |
| 4. (unit 5, 6.13) | **Award 1 mark** for each reason up to a maximum of 3 marks.  
                      • To reflect on what went well/what could have been done better  
                      • To ensure the ongoing support of individuals  
                      • To improve quality of care to individuals/improve skills and knowledge of care team  
                      • To prevent risk or harm to individuals  
                      • To maintain/enhance reputation of the service  
                      • To help worker understand what they are doing well and areas for improvement  
                      
  *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 5. (unit 1, 7.1) | **Award 1 mark** for each reason up to a maximum of 2 marks.  
                      • Risk that injury has been undetected  
                      • Other staff will be unable to provide continuity of care  
                      • Lack of audit trail if injuries/bruising are later discovered  
                      • Lack of audit trial to support treatment or admission to hospital  
                      • It is a worker’s responsibility to record this/it is a duty of care  
                      • There may be other factors that could have led to the fall  
                      
  *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 2 marks |
<p>| 6. (unit 1, 3.5) | <strong>Award 1 mark</strong> for each reason described up to a maximum of 2 marks. | 2 marks |</p>
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<thead>
<tr>
<th>Question (spec ref)</th>
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<th>Maximum marks</th>
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<tr>
<td>7. (unit 5, 1.10)</td>
<td><strong>Award 1 mark</strong> for a basic outline of the definition including one of the points below. <strong>Award 2 marks</strong> for a more detailed definition including one or two of the points below and that may be linked to the context of the case study. <strong>Answers could include:</strong> - Being responsible for own actions - Putting the interests of individuals first - Working within limits of own ability/skills - Respecting the rights and interests of individuals - Following policies and procedures relevant to own role <em>Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.</em></td>
<td>2 marks</td>
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<tr>
<td>8. (a) (unit 5, 1.11)</td>
<td><strong>Award 1 mark</strong> for each method up to a maximum of 3 marks. - Review and consider own actions and their impact on others - Ask for feedback from colleagues/manager/individuals - Completing questions within induction workbooks - Asking open questions about their practice - Discussions within supervision/review meetings - Team meetings - It is a duty of care/duty of candour - Reflection following training <em>Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.</em></td>
<td>3 marks</td>
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| 8. (b) (unit 5, 1.11) | **Award 1 mark** for each reason up to a maximum of 3 marks.  
- To identify what they have learnt  
- To identify areas of development  
- To identify good practice  
- To identify areas of own improvement  
- To change/find better ways of working  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 9. (unit 5, 6.8) | **Award 1 mark** for each reason up to a maximum of 3 marks.  
- His actions could be considered abuse of power  
- He needs to improve his practice in line with codes of practice  
- He needs to improve his practice in line with key legislation  
- To stop him passing on practice that is not reflective of organisation/sector values  
- To avoid dangerous practice/ support safeguarding  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 10. (unit 1, 1.4) | **Award 1 mark** for each area up to a maximum of 3 marks.  
- Marco failed to promote the dignity and privacy of the individual  
- Marco’s actions failed to promote equality  
- Marco’s practice did not show him working in partnership with colleagues and professionals to promote well-being, voice and control  
- Marco’s practice did not show how he works with the individuals and carers to keep themselves safe  
- Marco has failed to recognise and use sensitively the power that comes from working with individuals  
- Marco did not use agreed systems and procedures to share information appropriately with colleagues in a timely manner  
- Marco failed to record and report a situation when he should have done so  
- Marco has not met his responsibility to not directly or indirectly abuse neglect harm or exploit  
- Marco’s practice did not demonstrate working openly and cooperatively with colleagues | 3 marks |
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<td><strong>Total unit 001: 10 marks, unit 005: 20 marks</strong></td>
<td>30 marks</td>
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Level 2 Health and Social Care: Core (Adults)

Assessor Pack

Internal assessment (001/006) - Megan

This assessor pack is comprised of:
- instructions and guidance for the assessor
- a copy of the candidate pack
- the mark scheme

Instructions

This is a summative assessment to assess Units 001 and 006. Candidates should only attempt this assessment when all the learning of these units has been completed.

The assessment outcome is pass/fail. There is a total of 30 marks available, the pass mark for this assessment is 22.

The assessment is comprised of:
- a pre-release scenario that must be provided to the candidate two weeks prior to the assessment
- a set of questions/tasks that will be sat by the candidate. The candidate has 60 minutes to complete the questions/tasks.

The assessment must be:
- internally marked, by appropriately qualified staff, using the Marking Schemes provided. Please see the Specification for details of staff requirements
- internally quality assured, by appropriately qualified staff
- externally quality assured/verified by City & Guilds
- compliant with the Assessment Conditions below.

Note, where additional valid responses have been accepted by the marker for any question; these should be recorded and kept for sharing with the external quality assurer. This is to support standardisation across centres, and will allow additional valid responses to be added to the mark schemes at a later stage.

Assessment conditions

This assessment must be completed under the following conditions:
• The environment within which the assessments are completed must be controlled. There should be no interruption and/or influence whilst candidates are working on the tasks. However, whilst there is not a requirement for full or continual supervision; the centre must however be able to authenticate that the candidate’s work is their own.

• The candidate may have access to routine resources that may be available in ‘real life’ situations, for example PCs/laptops, tablets and dictionaries (including bilingual dictionaries). Mobile phones or other transmitting/receiving devices are not permitted and the candidate may not access the internet during the assessment.

• The candidate is permitted to bring notes that they have made on the pre-release scenario into the assessment. A maximum of two sides of A4 notes will be permitted. Candidates must be advised of this.

• Candidates can review and redraft evidence independently within the time controls for the assessment. Assessors should not provide input or guidance to learners during the assessment time. This includes providing formative feedback on the evidence being produced.
Level 2 Health and Social Care: Core (Adults) Qualification

Internal assessment (001/006) – Megan (Sample) Candidate pack

Candidate name:
Candidate number:
Centre name:
Centre number:

Instructions to Candidates

You have 1 hour in total to complete this assessment.

The questions within this assessment are based on the pre-released scenario which will have been provided to you. A copy of the scenario is included within this pack.

- All questions are mandatory.
- Make sure you have read through the scenario and the questions carefully before you start to answer the questions.
- Some scenarios may be unfamiliar, however your responses may draw on knowledge and understanding gained through your learning and experience.
- 2 sides of A4 notes may be prepared and taken into the assessment.
- All work submitted must be entirely your own. You are not allowed to be given any help with the responses you are writing throughout this assessment.
- Make sure you sign the declaration form included within this pack.
- If you run out of space, use continuation paper, taking care to number the question(s) correctly.

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Assessor’s Comments:
Megan

Megan is an 89-year-old retired teacher. She has lived in her family home for over 60 years with her husband Jon but sadly, he passed away 5 months ago. Jon used to provide any support Megan needed, such as managing the finances and shopping. Megan is very keen to remain living at home and is now supported by her daughter, Julia, who lives locally, and her neighbours. Megan has been very forgetful for some years but does not currently have a formal diagnosis of dementia. To date Megan has not received support from any local care services as Jon used to provide any support she needed.

Recently Megan has become increasingly physically frail, she is breathless when she walks any distance. Julia has noticed she can no longer walk to the local shops. Megan uses Jon’s stair lift to get up and down stairs and she is sleeping a lot during the day.

Julia has been staying with her Mother overnight twice a week, but has to work during the day. She has noticed Megan has periods of agitation, tearfulness and confusion especially during the evening and night. Megan is waking every few hours wondering if it is time to get up. Sometimes Julia has noticed that she doesn’t change her clothes and forgets to wash.

Julia is concerned that Megan becomes upset when she remembers that Jon has died, whilst at other times she doesn’t seem to realise he has passed away. Recently Julia has started to feel the strain of providing support and has asked the GP to refer her mother to the local social services to have an assessment of her needs.

Last month Megan received a visitor to her house who she understood was from her bank. The visitor convinced her to hand over her bankcard and pin number. When Megan mentioned this to Julia she immediately called the bank and the police. When asked questions about the incident Megan had difficulty recalling the visitors name or any details about the reason for the visit and became very distressed. This resulted in Julia being very concerned about how to support her mother and to keep her safe at home.

Following the assessment of her needs, care and support workers now visit twice a day to provide support with personal care and mealtimes. Julia still stays overnight twice a week with her Mother but leaves early in the morning. Megan says that she does not like strangers coming into the house, and that she can cope by herself.

The local care team have also referred her to other community services which provide activities and home based services. They believe these services would support Megan, allow her to meet other people within the local community and give her something to look forward to in the week. A close neighbour has offered to accompany Megan to go to a local lunch club and Julia has arranged for a befriender to help her access an audio library service.

Today a member of the care team has visited Megan and found that she has not eaten the previous meal provided for her. She did not realise she had forgotten to eat and it is clear that she has not taken her medication. Megan is wearing her outside coat and says she feels very cold. Megan’s neighbour also reports that she found Megan outside her house yesterday upset and confused, saying she did not know how to get back into the house.

The care and support worker contacts the manager to report her concerns. She is also worried that Megan’s personal plan does not reflect the level of support that she needs. Julia is worried about her mum leaving the house and becoming lost and confused, especially
after the issue with her bank card, she feels that she is vulnerable. Julia has asked the care and support worker to ensure that her mother is locked in when she leaves the house.
1. a) Identify two potential communication barriers between Megan and members of the care team. [2 marks]

b) Describe two ways to address one of the barriers identified in (1a). [2 marks]

2. Describe three ways that the recent death of her husband may have affected Megan’s mental well-being. [3 marks]
3. Describe **three** ways in which using a person centred approach to providing care will benefit Megan. [3 marks]

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4. Describe **two** ways in which the Social Services and Well-being (Wales) Act 2014 aims to help protect individuals like Megan who might be more at risk of harm and abuse. [2 marks]

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5. Describe **three** factors that need to be considered by care and support workers when **reporting** concerns about Megan to the team manager. [3 marks]

6. Julia was concerned when Megan couldn’t remember why she gave her bank details to a visitor.

Outline **three** ways in which Megan can be supported to be aware of how to stay safe in her home. [3 marks]
7. Describe **two** ways that members of the care and support team can protect themselves from accusations of potential abuse towards individuals they are caring for. [2 marks]

8. Explain the benefits that Megan might receive from the support of an independent advocate. [4 marks]
9. Describe **three** factors that contribute to Megan being at increased risk of harm or abuse. [3 marks]

[Expanded answer space]

10. Describe **three** issues that exist if a care and support worker is asked to work outside an individual’s personal plan. [3 marks]

[Expanded answer space]
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<td><strong>Unit 001: Principles and values of health and social care (Adults) Unit 006: Safeguarding individuals</strong></td>
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<td><strong>1.a</strong></td>
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<td><strong>(Unit 1, 7.5)</strong></td>
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<td><strong>Award 1 mark</strong> for each identified way up to a maximum of 2 marks.</td>
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<td>- Memory loss/confusion</td>
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<td>- Fear of strangers</td>
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<td>- Resistance to having care and support</td>
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<td>- Megan’s agitation</td>
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<td><strong>Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.</strong></td>
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<td><strong>(Unit 1, 7.5)</strong></td>
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<td><strong>Award 1 mark</strong> for each described way up to a maximum of 2 marks.</td>
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<tr>
<td>- Identify what matters to Megan</td>
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<td>- Get to know Megan</td>
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<tr>
<td>- Reassure Megan if she is distressed or anxious</td>
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<td>- Talk to Julia about different ways that can help Megan (e.g. use of written notes, lifestory work)</td>
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<td>- Consider how new members of the team are introduced</td>
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<td><strong>(Unit 1, 10.1)</strong></td>
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<td><strong>Award 1 mark</strong> for each described way up to a maximum of 3 marks.</td>
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<td>- Anxiety / depression</td>
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<td>- Lonely and isolated</td>
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<td>- Fear of having no-one to care for her/being alone</td>
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<td>- Feelings of loss and grief</td>
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<td>- Uncertainty about the future – disbelief / confusion</td>
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<td>- Feeling of being an increased burden on her daughter/neighbours</td>
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<td>- Loss of autonomy/being dependent on others</td>
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<td>- Shock and anger</td>
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<td>3. <strong>Award 1 mark</strong> for each described way up to a maximum of 3 marks.&lt;br&gt;- Care can support what matters/is important for Megan&lt;br&gt;- Allows Megan to remain living in her own home, close to family/friends&lt;br&gt;- Helps support Megan to stay safe&lt;br&gt;- Reduces her anxiety&lt;br&gt;- Supports her well-being (physical/mental)&lt;br&gt;- Helps Megan to feel in control of the situation&lt;br&gt;- Supports Julia to continue to care for her mum&lt;br&gt;- Focuses on what Megan is still able to do – encouraging her to do as much as possible, not taking over&lt;br&gt;- Supports promotion of a valued range of meaningful activities (vocational, domestic, personal, leisure, educational and social activities) that support what matters/is important for Megan</td>
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<td>4. <strong>Award 1 mark</strong> for each described way up to a maximum of 2 marks.&lt;br&gt;- Promotes prevention and early intervention&lt;br&gt;- Promotes voice and control of individuals&lt;br&gt;- Promotes the use of advocates where needed&lt;br&gt;- Provides protection for those identified as ‘adults at risk’&lt;br&gt;- Ensures action is taken in cases where abuse is suspected&lt;br&gt;- Right to assessment of need for the individual and their families/carers</td>
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<td>5. <strong>Award 1 mark</strong> for each described consideration up to a maximum of 3 marks.&lt;br&gt;- Consideration of confidentiality if reporting against Megan’s wishes&lt;br&gt;- Data protection consideration&lt;br&gt;- Duty to report&lt;br&gt;- Information should only be passed on to the relevant parties – i.e. the manager</td>
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| 6. (Unit 6, 2.7)    | **Award 1 mark** for each outlined way up to a maximum of 3 marks.  
- Remind Megan to request identification from all visitors – reminder to ask for identification kept near door  
- Remind Megan only let individuals in if she is expecting them – checking visitors against a reminder schedule  
- Remind her to use the call button/panic alarm if she is frightened  
- Remind her of the importance of not giving personal details to anyone – e.g. pin number  
- Report any concerns to the manager  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 7. (Unit 6, 2.9)    | **Award 1 mark** for each described way up to a maximum of 2 marks.  
- Following codes of conduct /professional practice  
- Following established workplace procedures for recording accidents, incidents, near misses etc.  
- Reporting/recording issues following risk assessments  
- Following individual's personal plans  
- Being clear in communication with individuals/ letting the individual know what you can/cannot do  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 2 marks |
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| 8. (Unit 6, 2.2) | **Award 1 mark** for a limited response which shows little knowledge and understanding of the benefits that Megan might receive from the support of an independent advocate. The response does not specifically link the identified benefits with the support of an independent advocate.  
**Award 2 marks** for a basic response which shows some knowledge and understanding of the benefits that Megan might receive from the support of an independent advocate. The response may not fully link the identified benefits with the support of an independent advocate.  
**Award 3 marks** for a good response which shows knowledge and understanding of the benefits that Megan might receive from the support of an independent advocate. The response links the identified benefits with the support of an independent advocate.  
**Award 4 marks** for an excellent response which shows detailed knowledge and understanding of the benefits that Megan might receive from the support of an independent advocate. The response clearly links the identified benefits with the support of an independent advocate.  
**Answers could include:**  
An advocate:  
- Is trained specifically to support individuals such as Megan  
- Helps Megan to speak up about what is important to her  
- Helps ensures Megan’s rights are upheld  
- Finds out information that will help Megan  
- Helps Megan to understand her options and choices  
- Ensures that meetings are set up to support Megan to fully participate  
- Adapting communication to support Megan to understand  
- is independent  
- can provide support in contacting relevant services who might be able to provide support  
- will promote best practice in relation to the safeguarding of Megan  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 4 marks |
| 9. (Unit 6, 3.1) | **Award 1 mark** for each described factor up to a maximum of 3 marks.  
- Physically frail  
- Memory loss/confusion | 3 marks |
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| 10. (Unit 6, 2.1) | **Award 1 mark** for each skill/behaviour up to a maximum of 3 marks.  
- Not upholding codes of conduct/professional practice  
- Potential to promote restrictive practices  
- Not upholding the rights of Megan  
- Potential safeguarding issue  
- Working outside role/responsibility  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |

| Total unit 001: 10 marks, unit 006: 20 marks | 30 marks |
Level 2 Health and Social Care: Core Qualification

SAMPLE INTERNAL ASSESSMENT
Assessor Pack

Internal assessment (002/004) – Dafydd and Sian

This assessor pack is comprised of:
- instructions and guidance for the assessor
- a copy of the candidate pack
- the mark scheme

Instructions

This is a summative assessment to assess Units 002 and 004. Candidates should only attempt this assessment when all the learning of these units has been completed.

The assessment outcome is pass/fail. There is a total of 30 marks available, the pass mark for this assessment is 22.

The assessment is comprised of:
- a pre-release scenario that must be provided to the candidate two weeks prior to the assessment
- a set of questions/tasks that will be sat by the candidate. The candidate has 60 minutes to complete the questions/tasks.

The assessment must be:
- internally marked, by appropriately qualified staff, using the Marking Schemes provided. Please see the Specification for details of staff requirements
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Assessment conditions

This assessment must be completed under the following conditions:

- The environment within which the assessments are completed must be controlled. There should be no interruption and/or influence whilst candidates are working on the tasks. However, whilst there is not a requirement for full or continual supervision; the centre must however be able to authenticate that the candidate’s work is their own.
- The candidate may have access to routine resources that may be available in ‘real life’ situations, for example PCs/laptops, tablets and dictionaries (including bilingual dictionaries). Mobile phones or other transmitting/receiving devices are not permitted and the candidate may not access the internet during the assessment.
- The candidate is permitted to bring notes that they have made on the pre-release scenario into the assessment. A maximum of two sides of A4 notes will be permitted. Candidates must be advised of this.
- Candidates can review and redraft evidence independently within the time controls for the assessment. Assessors should not provide input or guidance to learners during the assessment time. This includes providing formative feedback on the evidence being produced.
Level 2 Health and Social Care: Core (Children and Young People) Qualification

Internal assessment (002/004) – Dafydd and Sian (Sample)
Candidate pack

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Instructions to Candidates

You have **1 hour in total** to complete this assessment.

The questions within this assessment are based on the pre-released scenario which will have been provided to you. A copy of the scenario is included within this pack.

- All questions are mandatory.
- Make sure you have read through the scenario and the questions carefully before you start to answer the questions.
- Some scenarios may be unfamiliar, however your responses may draw on knowledge and understanding gained through your learning and experience.
- 2 sides of A4 notes may be prepared and taken into the assessment.
- All work submitted must be **entirely** your own. You are not allowed to be given any help with the responses you are writing throughout this assessment.
- Make sure you **sign the declaration** form included within this pack.
- If you run out of space, use continuation paper, taking care to number the question(s) correctly.

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Assessor’s Comments:
Dafydd and Sian

Heather Way is a residential care setting in a small town. It is registered to accommodate children and young people aged 7 to 18 and employs some workers who speak both English and Welsh.

Heather Way believes that children and young people thrive in a healthy environment; they provide healthy meals that use vegetables grown in their own garden and promote experiential learning by encouraging the children to ‘grow their own’.

The setting promotes positive routines including set meal and homework time and through regularly scheduling developmental activities that includes working very closely with the Prince’s Trust. It provides a ‘homely’ environment that includes a communal kitchen and living room with separate bedrooms that are personalised by the children and young people. There is a separate study that the children and young people can use for their homework or quiet time and plenty of outdoor areas to encourage exercise and the enjoyment of the outdoors.

Two siblings Dafydd aged 11 and Sian aged 13 have been brought into the setting for a short term placement because their mother, who has a history of clinical depression, is in hospital after experiencing a mental health crisis. As a result of her mother’s illness, Sian had been the primary carer for both her mother and Dafydd. A role that she had been struggling with. The children do not have any contact with their father who has a history of violent and abusive behaviour towards the family.

The family are first language Welsh speakers. In order to keep them safe, their mother had recently decided to move to a new area. As the closest Welsh school is two bus journeys away, the children go to the local English speaking school where they are not able to communicate using their preferred language.

The children’s new school had also made a referral to Social Services because the children were often very late for school and were frequently poorly dressed and hungry. Dafydd had been falling asleep in class and was displaying aggressive behaviour/outbursts towards some of the other children and the staff. Sian had become withdrawn and found it hard to make friends; stating that she misses her old friends and ‘just wants to go home’.

Welsh speaking key workers at the home will support the children, and their mother, to ensure that their personal plans reflect their needs and identify outcomes that are important to them.

The children arrive at Heather Way just before lunch and are very quiet and withdrawn - Sian holds on to her younger brothers hand at all times. The key workers greet the children in Welsh and are welcoming and friendly. To put them at ease the key workers show the children round the setting. They go through the welcome pack, and tell them about the current activity plan, the rewards system, the house rules, routines and bedtimes.

At lunchtime, Dafydd and Sian are introduced to the other children and the rest of the team. After lunch they appear to be a bit more comfortable so each key worker takes the children to their own rooms and encourages them to unpack and put out their own belongings such as posters and other items to help make the rooms feel like their own. Dafydd is overheard
saying that he might like to try to grow something in the vegetable garden, with Sian responding “just like grandad”. The key workers note that the children have very few personal belongings or clothes so they ask if they would like to go shopping to get some new clothes and other items to personalise their rooms.

To find out more about each child, the key workers talk to them about their interests and what they like doing. They also observe the siblings’ interactions with other children and young people and workers at Heather Way. During the first few days the team focus their time on doing simple activities and encourage the children’s active participation. This works well and they seem to respond well in social activities as long as the groups are not too large. Both children struggle in one-to-one situations but this is improving slowly. They communicate with their key workers in Welsh but their wish to go to Welsh school remains a key priority.

Over the next few weeks the children start to settle in to their new environment. Dafydd enjoys being in the garden, tending the vegetable patch and occasionally helping to prepare and cook the evening meal - he seems the most content in this environment. Sian has responded well to the rewards system that is in place in the setting and saved towards some pampering time, which she was able to enjoy with some of the other children.

Sian’s key worker discovers that Sian is creative and that art is an important emotional release for her. Sian is upset that she has had to leave some of her creations behind because of the sudden move. She is encouraged to join an after school art club.
Dafydd and Sian

Question set A

1. a. Identify **three** principles of the Social Services and Well-being (Wales) Act.  
   [3 marks]

b. Describe how **each** of these principles relate to Sian and Dafydd’s care and support.  
   [3 marks]

2. Describe **one** method used by the setting to meet the children’s communication needs.  
   [1 mark]
3. Describe **three** reasons why it is important for the key workers to find out more about the children’s history, interests and background. 

   3 marks

4  

   a. Identify **two** factors that are contributing to Sian’s social isolation. 

   2 marks

   b. Describe how **each** of these factors has impacted Sian. 

   2 marks
5. Describe **two** ways the key worker’s actions support Dafydd and Sian when they first arrive at the setting.  

6. The home promotes positive routines including set meal and home work time and regularly scheduling developmental activities.

   Explain how this might support Sian’s well-being and development.  

7. Identify **two** ways the environment at Heather Way supports the children’s holistic development.
8. Cooking is an example of experiential learning.

Give **two** examples how this might help Dafydd’s intellectual development. [2 marks]

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9. Sian is encouraged to join an after school art club.

Describe **two** ways this might benefit Sian’s health and well-being. [2 marks]

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10. A key worker has been asked to contribute to the planning of activities for Dafydd.

Contribute to the activity plan by completing sections a, b, c and d in the table below.

<table>
<thead>
<tr>
<th>Name of activity and description:</th>
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<tbody>
<tr>
<td>6 week Prince's Trust Gardening Course</td>
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<tr>
<td><strong>Resources</strong></td>
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<td>Suitable clothing</td>
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<tr>
<td>Gardening gloves</td>
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<td>Transport to venue</td>
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<td>Key worker</td>
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<tr>
<td>a. Identify one link between the activity and Dafydd’s intellectual growth. (1 mark)</td>
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<td>b. Identify one link between the activity and Dafydd’s physical growth. (1 mark)</td>
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<tr>
<td>c. Identify one link between the activity and Dafydd’s emotional growth. (1 mark)</td>
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<tr>
<td>d. State one way to safely support risks during the activity. (1 mark)</td>
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</table>

Total of 4 marks
# Mark Scheme –Dafydd and Sian Question Set A

**Unit 002: Principles and values of health and social care (Children and Young People)**  
**Unit 004: Health and well-being (Children and Young People)**

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer guide</th>
<th>Maximum marks</th>
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</table>
| **1a.** 
*(unit 2, 1.1)* | **Award 1 mark** for each identified principle up to a maximum of 3 marks.  
- Voice and control  
- Prevention and early intervention  
- Well-being  
- Co-production  
- Multi agency working | 3 marks |
| **1b.** 
*(unit 2, 1.2)* | **Award 1 mark** for each valid point raised **per principle** identified in (1a).  
A maximum of 1 mark can be achieved for each point given per principle.  
- **Voice and control**  
  - Supports Sian and Dafydd to say what is important to them and input into their personal plan  
- **Prevention and early intervention**  
  - ensures the children are in a safe place  
  - ensures the children’s situation does not escalate, i.e. school referral  
- **Well-being**  
  - promotes aspects of the children’s mental well-being  
  - promotes aspects of the children’s physical well-being  
  - promotes aspects of the children’s social well-being  
  - the children supported to engage in activities that are important to them.  
- **Co-production**  
  - encourages the children to become active in the delivery and design of their care (e.g. personalising their rooms, going to their school of choice)  
- **Multi agency working** | 3 marks |
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<th>Question</th>
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<td></td>
<td>o promotes work between agency/groups such as health, local Social Services and the community</td>
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<td>o sharing of relevant information to ensure the best outcome could include working with the school; Prince’s trust</td>
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<td><em>Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.</em></td>
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<td>2. (unit 2, 7.4)</td>
<td><strong>Award 1 mark</strong> for any of the following up to a maximum 1 mark.</td>
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<td>• Ensuring there are Welsh speakers to communicate with the children in the home</td>
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<td>• Introducing the children to the other children and young people in the home</td>
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<td>3. (unit 2, 3.3)</td>
<td><strong>Award 1 mark</strong> for each described reason up to a maximum of 3 marks</td>
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<td>• To be able to deliver child centred care</td>
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<td>• To find out about what is important/what matters to them</td>
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<td>• To understand the reason behind any behaviours the children present</td>
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<td>• To ensure the children’s history and background is recorded accurately i.e. personal plans</td>
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<td>• To ensure information is shared with other workers as appropriate</td>
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<td>• To help plan future valued and meaningful activities</td>
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<td>• To help promote intellectual/ physical/emotional/social development</td>
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<td>• To ensure family networks are maintained as appropriate</td>
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<td>• To meet the children’s health and well-being needs</td>
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<td><em>Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.</em></td>
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<td>4a. (unit 4, 2.2)</td>
<td><strong>Award 1 mark</strong> for each factor up to a maximum of 2 marks.</td>
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<td>• Language barrier</td>
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<td>• Lack of friends/social network</td>
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<td>• New/strange environment</td>
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<td>• Not always able to speak preferred language</td>
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<td>• Breakdown of relationship/family</td>
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| | • Mothers deteriorating health  
• Her role as a young carer | |
| 4b. | **Award 1 mark** for each linked impact up to maximum of 2 marks.  
• Is withdrawn  
• Feeling overwhelmed/under pressure  
• Lacks a sense of belonging  
• Lacks confidence  
• Feeling lonely  
• Feeling anxious | 2 marks |
| *(unit 4, 2.2)* | | |
| 5. | **Award 1 mark** for each action up to a maximum of 2 marks  
• Speak to the children in Welsh - to meet their communication and language needs  
• Welcoming and friendly introduction to setting - provides a safe/predictable environment; sense of security, respect  
• They are given time to familiarise themselves with the setting - enabling positive transitions  
• Encourage the children to personalise their rooms - providing individualised/child centred care | 2 marks |
| *(unit 4, 2.18)* | | |
| 6. | **Award 1 mark** for a limited response which shows little knowledge and understanding of how the promotion of positive routines support Sian’s well-being and development.  
The response does not specifically link how the promotion of positive routines supports Sian’s well-being and development.  
**Award 2 marks** for a basic response which shows some knowledge and understanding of how the promotion of positive routines support Sian’s well-being and development.  
The response may not fully link how the promotion of positive routines supports Sian’s well-being and development.  
**Award 3 marks** for a good response which shows knowledge and understanding of how the promotion of positive routines supports Sian’s well-being and development.  
The response links the promotion of positive routines with how they support Sian’s well-being and development. | 4 marks |
<p>| <em>(unit 4, 3.6)</em> | | |</p>
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| (spec ref) | **Award 4 marks** for an excellent response which shows detailed knowledge and understanding of how positive routines support Sian’s well-being and development. The response clearly links the promotion of positive routines with how they support Sian’s well-being and development.  
**Answers could include:**  
- Consistency  
- Security  
- Predictability in his new home  
- Opportunity to learn more effectively  
- Opportunity to relax and participate in activities and experiences  
- Opportunity to experience risk  
- Opportunity for self-care/ to develop her own identify  
- Opportunity to socialise  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* |  |
| 7. | **Award 1 mark** for any of the following up to a maximum of 2 marks.  
The environment at Heather Way provides:  
- opportunities for learning  
- opportunities for exploration and experimentation  
- opportunities for physical activity  
- opportunities to promote self-esteem and identity  
- opportunities for choice  
- opportunities to engage in activities and interests  
- a feeling of safety and security  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 2 marks |
| (unit 4, 3.2) | | |
| 8. | **Award 1 mark** for each example up to a maximum 2 marks.  
Dafydd learns how:  
- heat works  
- ingredients can change into a meal  
- store and prepare food  
- to balance a healthy diet  
- to budget | 2 marks |
<p>| (unit 4, 2.16) | | |</p>
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| (spec ref) | to measure, weigh  
|          | to maintain health and safety/clean environment  
|          | *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* |               |
| 9.       | **Award 1 mark** for each description up to a maximum of 2 marks.  
| (unit 4, 2.13) | • Encourages expression of feelings  
|          | • Encourages emotional release  
|          | • Improves mental well-being  
|          | • Provides sense of pride/ achievement  
|          | • Provides opportunity for engagement in social interaction  
|          | *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 2 marks |
| 10a.     | **Award 1 mark** for each link up to a maximum of 1 mark.  
| (unit 4, 2.11) | • Understanding the world around them e.g. life cycle of plants, where food/flowers come from  
|          | • Problem solving skills  
|          | • Planning and organising skills  
|          | • Mathematical skills  
|          | • Language development/ communication skills  
|          | • Participation in team work  
|          | • Opportunity to investigate / explore different materials and texture  
|          | • Experiment and predict outcomes  
|          | *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 1 mark |
| 10b.     | **Award 1 mark** for each link up to a maximum of 1 mark.  
| (unit 4, 2.11) | • Being outdoors  
|          | • Being physically active  
|          | • Positive release of energy and aggression  
|          | • Hand eye coordination and physical dexterity  
|          | *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 1 mark |
| 10c.     | **Award 1 mark** for each link up to a maximum of 1 mark.  
<p>|          | • Social interaction | 1 mark |</p>
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| (unit 4, 2.11)    | • Sense of achievement  
  • Sense of purpose  
  • Awareness of death and dying  
  • Develop work ethic  
  *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* |               |
| 10d. (unit 4, 4.7) | **Award 1 mark** for each risk up to a maximum of 1 mark.  
  • Support him to understand and use gardening equipment safely  
  • Encourage him to listen to and follow safety instructions  
  • Agree realistic goals and outcomes  
  • Support him to be aware of risks within the gardening environment e.g. poisonous plants, animal faeces  
  *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 1 mark |

**Total unit 002: 10 marks, unit 004: 20 marks**  
30 marks
Level 2 Health and Social Care: Core (Children and Young People)

Assessor Pack

Internal assessment (002/005) - Chloe

This assessor pack is comprised of:
- instructions and guidance for the assessor
- a copy of the candidate pack
- the mark scheme

Instructions

This is a summative assessment to assess Units 002 and 005. Candidates should only attempt this assessment when all the learning of these units has been completed.

The assessment outcome is pass/fail. There is a total of 30 marks available, the pass mark for this assessment is 22.

The assessment is comprised of:
- a pre-release scenario that must be provided to the candidate two weeks prior to the assessment
- a set of questions/tasks that will be sat by the candidate. The candidate has 60 minutes to complete the questions/tasks.

The assessment must be:
- internally marked, by appropriately qualified staff, using the Marking Schemes provided. Please see the Specification for details of staff requirements
- internally quality assured, by appropriately qualified staff
- externally quality assured/verified by City & Guilds
- compliant with the Assessment Conditions below.

Note, where additional valid responses have been accepted by the marker for any question; these should be recorded and kept for sharing with the external quality assurer. This is to support standardisation across centres, and will allow additional valid responses to be added to the mark schemes at a later stage.
Assessment conditions

This assessment must be completed under the following conditions:

- The environment within which the assessments are completed must be controlled. There should be no interruption and/or influence whilst candidates are working on the tasks. However, whilst there is not a requirement for full or continual supervision; the centre must however be able to authenticate that the candidate’s work is their own.

- The candidate may have access to routine resources that may be available in ‘real life’ situations, for example PCs/laptops, tablets and dictionaries (including bilingual dictionaries). Mobile phones or other transmitting/receiving devices are not permitted and the candidate may not access the internet during the assessment.

- The candidate is permitted to bring notes that they have made on the pre-release scenario into the assessment. A maximum of two sides of A4 notes will be permitted. Candidates must be advised of this.

- Candidates can review and redraft evidence independently within the time controls for the assessment. Assessors should not provide input or guidance to learners during the assessment time. This includes providing formative feedback on the evidence being produced.
Level 2 Health and Social Care: Core (Children and Young People) Qualification

Internal assessment (002/005) – Chloe (Sample)
Candidate pack

Candidate name:
Candidate number:
Centre name:
Centre number:

Instructions to Candidates

You have 1 hour in total to complete this assessment.

The questions within this assessment are based on the pre-released scenario which will have been provided to you. A copy of the scenario is included within this pack.

- All questions are mandatory.
- Make sure you have read through the scenario and the questions carefully before you start to answer the questions.
- Some scenarios may be unfamiliar, however your responses may draw on knowledge and understanding gained through your learning and experience.
- 2 sides of A4 notes may be prepared and taken into the assessment.
- All work submitted must be entirely your own. You are not allowed to be given any help with the responses you are writing throughout this assessment.
- Make sure you sign the declaration form included within.
- If you run out of space, use continuation paper, taking care to number the question(s) correctly.

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<th>Assessor’s use only</th>
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**Assessor’s Comments:**
Chloe

Daffodil House is a four bed residential care home that offers therapeutically-informed practice for children and young people. The residential care home setting has a good reputation for focusing on a holistic approach and for its therapeutic, clinical and educational support. However, a recent Care Inspectorate Wales (CIW) inspection rated the home as ‘Requires Improvement’. An area for improvement was the standard of staffing, the inspector reported that Daffodil House did not have enough ‘suitably qualified, competent and experienced staff’. The home needs to improve the support, training and supervision for staff to allow them to do their jobs more effectively.

As part of the plans for improvement, the registered manager is changing the home’s processes to follow the All Wales Health and Social Care Induction Framework (AWIF) and she has introduced mentoring and job shadowing for new workers.

Chloe is a new member of the team. She is really enjoying her new job as a residential care and support worker and has nearly finished working her way through the induction framework. As part of her regular supervision meetings, Chloe is asked to reflect on her practice and any areas that she is unsure of or may need additional training.

The registered manager has asked Owen to act as Chloe’s mentor for her first six months. He is an experienced care and support worker and is a respected member of the team. The manager feels this would be a good opportunity for his continuing professional development (CPD).

Chloe enjoys engaging with children and young people in the setting, particularly through the arts and crafts sessions. She is learning how to communicate more effectively with the children and young people to find out what is important to them. She is using Cymraeg Gwaith to develop her Welsh language skills and is now able to greet the Welsh speaking children and young people, and ask how they are in their preferred language.

She is excited to become the social media champion and is keen to show other workers, children and young people how they can use social media safely. The setting is particularly concerned that the children and young people do not share information inappropriately as some of them have been asking for social media contact details from staff.

Chloe has a supervision with her manager and raises some concerns:

- She was with Owen in the garden and observed Simon, another care and support worker, attending to a child who was crying and being bullied by some of the other children. Simon quickly approached the children but was heard to say ‘Dry your eyes. You need to stick up for yourself’. He then made a joke about bullying and all the children laughed. He did not record or report the incident and passed it off as a ‘one off’. Owen explained to Chloe that this is not best practice, fails to meet safeguarding procedures and is an example of ineffective communication and poor record keeping.
- There was another afternoon when Chloe was shadowing Simon. He gave her many tasks that he said he did not like doing. He took several long breaks and left Chloe to continue with the tasks alone. Chloe was unsure as to whether she had completed these correctly so went and asked the registered manager for support.
During Chloe’s supervision meeting the registered manager states she is happy with her progress. She says that she has had good feedback from other workers about Chloe’s positive interactions with the children and young people in the home. Chloe raises her concerns about Simon and the manager praises her for asking for help. The manager talks about the Code of Professional Practice and how this sets out the way that workers are expected to practice. They look at this together and identify which of the standards have not been met. The manager advises Chloe that she will talk to Simon about the concerns.

The registered manager meets with Simon to talk about the bullying incident and the fact that he left Chloe unsupervised. She asks him to reflect on how he should have acted and how he has not met the standards set out in the Code of Professional Practice. She talks to him about how important it is that he understands his role and responsibilities, his duty of care and accountability, duty of candour and the need to keep children and young people safe.
Chloe
Question set A

1. Describe three ways Continuing Professional Development (CPD) supports Professional Practice in settings such as Daffodil House. [3 marks]

2. Chloe is keen to show staff and children and young people how they can use social media safely.

State three reasons why it is important that staff do not share their social media contact details with the children and young people. [3 marks]
3. Chloe enjoys engaging with the children and young people in arts and crafts sessions.

Describe **three** examples of how Chloe can promote a child centred approach during these sessions.  

[3 marks]

4. Chloe has regular supervision meetings and is asked to reflect on her practice.

Give **three** reasons why supervision and reflective practice is important to the well-being of individuals.  

[3 marks]
5. Simon did not record or report the bullying incident.

Outline two reasons why this is considered to be ineffective communication. [2 marks]

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6. Simon is unprofessional when he makes a joke about the bullying incident.

Describe two reasons why his behaviour is considered not to be in line with the principles and values of Daffodil House. [2 marks]

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7. The registered manager reminds Simon of his accountability.

What is meant by the term accountability? [2 marks]

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8. The registered manager has asked Chloe and Simon to reflect on their practice.

a. List **three** methods Chloe and Simon might use to help them reflect.  
   [3 marks]

b. Outline **three** reasons why reflection is important for all members of staff in the setting.  
   [3 marks]
9. Give **three** reasons why it was important that the registered manager provided feedback to Simon regarding his practice. [3 marks]

10. Describe **three** ways that Simon’s practice has breached Codes of Conduct and Professional Practice. [3 marks]
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<tr>
<th>Question (spec ref)</th>
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</table>
| 1. *(unit 5, 6.5)* | **Award 1 mark** for each description up to a maximum of 3 marks.  
- Promotes professional/best practice  
- Ensures workers are continuously increasing their knowledge/ knowledge is kept up to date  
- Ensures workers are continuously improving their practical skills/ maintaining currency of practical skills  
- Supports reflective practice  
- Supports learning and development throughout career/ supports the gaining of new knowledge/learning new skills  
- Meets minimum standards/regulatory requirements  
- Supports career progression  
- Builds confidence/ competence in the workplace  
- Supports the ability to meet the needs of children/young people  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 2. *(unit 5, 2.5)* | **Award 1 mark** for each reason up to a maximum of 3 marks.  
- It is unprofessional/crosses professional boundaries  
- Puts staff at risk – sharing personal details  
- Puts children and young people at risk – sharing personal details  
- Gives families and visitors a poor impression of the setting/ potentially damages reputation of the setting  
- Does not meet/reflect ethos of the organisation/ so has potential for disciplinary action  
- Fails to meet Codes of Professional Practice | 3 marks |
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<td>3. (unit 2, 3.6)</td>
<td><strong>Award 1 mark</strong> for each example up to a maximum of 3 marks.</td>
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<td>- Plan the environment around children’s and young people’s likes, needs and preferences</td>
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<td>- Given lots of choice</td>
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<td>- Room layouts that encourage easy and unrestricted flow between different play areas</td>
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<td>- Use observations to support planning</td>
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<td>- Give children and young people a voice/ allows them to say what is important to them.</td>
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<td>4. (unit 5, 6.13)</td>
<td><strong>Award 1 mark</strong> for each reason up to a maximum of 3 marks.</td>
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<td>- To reflect on what went well/ what could have been done better</td>
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<td>- To ensure the ongoing support of children and young people</td>
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<td>- To improve quality of care to children and young people/improve skills and knowledge of care team</td>
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<td>- To prevent risk or harm to children and young people</td>
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<td>- To maintain/ enhance reputation of the service</td>
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<td>- To help workers understand what they are doing well and areas for improvement</td>
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<td>5. (unit 2, 7.1)</td>
<td><strong>Award 1 mark</strong> for each reason up to maximum of 2 marks.</td>
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<td>- Risk that further incidents could escalate</td>
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<td>- Other staff will be unable to provide continuity of care</td>
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<td>- Underlying issues or concerns may not be noticed</td>
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<td>- Lack of audit trail to support observations and follow up</td>
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<td>- Failure to keep other team members updated</td>
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| 6. (unit 2, 3.5)    | **Award 1 mark** for each reason described up to a maximum of 2 marks.  
- Simon does not display a concern for the well-being of the child.  
- Simon shows a lack of dignity and respect for the child  
- Simon may have caused the child to feel embarrassed or humiliated further/ reduced their confidence/feeling of worth  
- Simon may have damaged the trust that the child feels in other care and support workers in the setting  
- Simon is not compliant with duty of care/safeguarding  
- Simon is not compliant with codes of conduct  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 2 marks |
| 7. (unit 5, 1.10)  | **Award 1 mark** for a basic outline of the definition including one of the points below.  
**Award 2 marks** for a more detailed definition including one or two of the points below and may be linked to the pre-release scenario.  

**Answers could include:**  
- Being responsible for own actions  
- Putting the interests of children and young people first  
- Working within limits of own ability/skills  
- Respecting the rights and interests of children and young people  
- Following policies and procedures relevant to own role  
- Duty of care/duty of candour | 2 marks |
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| 8a. (unit 5, 1.11) | **Award 1 mark** for each method up to a maximum of 3 marks.  
- Review and consider own actions and their impact on others  
- Ask for feedback from colleagues/manager/children and young people (where appropriate)  
- Completing questions within induction workbooks  
- Asking open questions about their practice  
- Discussions within supervision/review meetings  
- Team meetings  
- Reflection after training | 3 marks |
| Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor. | | |
| 8b. (unit 5, 1.11) | **Award 1 mark** for each reason up to a maximum of 3 marks.  
- To identify what they have learnt  
- To identify areas of development  
- To identify good practice  
- To identify areas of own improvement  
- To change/find better ways of working | 3 marks |
| Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor. | | |
| 9. (unit 5, 6.8) | **Award 1 mark** for each reason up to a maximum of 3 marks.  
- His actions could be considered an abuse of power  
- He needs to improve his practice in line with codes of practice  
- He needs to improve his practice in line with legislation  
- To stop him passing on practice that is not reflective of organisation/sector values  
- To support safeguarding | 3 marks |
<p>| Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor. | | |</p>
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| 10. (unit 2, 1.4)   | **Award 1 mark** for each way up to a maximum of 3 marks.  
• Simon’s action failed to promote dignity and privacy  
• Simon’s action failed to promote equality  
• Simon did not work in partnership with colleagues and professionals to promote well-being, voice and control  
• Work with the individuals and carers to keep themselves safe  
• Simon has not worked in a way that recognises and uses sensitively the power that comes from own work  
• Simon did not use agreed systems and procedures to share information appropriately with colleagues in a timely manner  
• Simon failed to record and report  
• Simon failed to meet his responsibilities to not directly or indirectly abuse, neglect, harm or exploit  
• Simon did not demonstrate working openly and cooperatively with colleagues  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |

**Total unit 002: 10 marks, unit 005: 20 marks** | **30 marks** |
This assessor pack is comprised of:
- instructions and guidance for the assessor
- a copy of the candidate pack
- the mark scheme

**Instructions**

This is a **summative assessment** to assess Units 002 and 006. Candidates should only attempt this assessment when all the learning of these units has been completed.

The assessment outcome is **pass/fail**. There is a total of 30 marks available, **the pass mark for this assessment is 22**.

The assessment is comprised of:
- a pre-release scenario that must be provided to the candidate two weeks prior to the assessment
- a set of questions/tasks that will be sat by the candidate. The candidate has 60 minutes to complete the questions/tasks.

The assessment must be:
- internally marked, by appropriately qualified staff, using the Marking Schemes provided. Please see the Specification for details of staff requirements
- internally quality assured, by appropriately qualified staff
- externally quality assured/verified by City & Guilds
- compliant with the **Assessment Conditions** below.

Note, where additional valid responses have been accepted by the marker for any question; these should be recorded and kept for sharing with the external quality assurer. This is to support standardisation across centres, and will allow additional valid responses to be added to the mark schemes at a later stage.

**Assessment conditions**
This assessment must be completed under the following conditions:

- The environment within which the assessments are completed must be controlled. There should be no interruption and/or influence whilst candidates are working on the tasks. However, whilst there is not a requirement for full or continual supervision; the centre must however be able to authenticate that the candidate’s work is their own.
- The candidate may have access to routine resources that may be available in ‘real life’ situations, for example PCs/laptops, tablets and dictionaries (including bilingual dictionaries). Mobile phones or other transmitting/receiving devices are not permitted and the candidate may not access the internet during the assessment.
- The candidate is permitted to bring notes that they have made on the pre-release scenario into the assessment. A maximum of two sides of A4 notes will be permitted. Candidates must be advised of this.
- Candidates can review and redraft evidence independently within the time controls for the assessment. Assessors should not provide input or guidance to learners during the assessment time. This includes providing formative feedback on the evidence being produced.
Level 2 Health and Social Care: Core (Children and Young People) Qualification

Internal assessment (002/006) – Rhys (Sample)
Candidate pack

Candidate name:
Candidate number:
Centre name:
Centre number:

Instructions to Candidates

You have 1 hour in total to complete this assessment.

The questions within this assessment are based on the pre-released scenario which will have been provided to you. A copy of the scenario is included within this pack.

- All questions are mandatory.
- Make sure you have read through the scenario and the questions carefully before you start to answer the questions.
- Some scenarios may be unfamiliar, however your responses may draw on knowledge and understanding gained through your learning and experience.
- 2 sides of A4 notes may be prepared and taken into the assessment.
- All work submitted must be entirely your own. You are not allowed to be given any help with the responses you are writing throughout this assessment.
- Make sure you sign the declaration form included within this pack.
- If you run out of space, use continuation paper, taking care to number the question(s) correctly.

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<tr>
<th>Assessor’s use only</th>
<th>Question</th>
<th>Maximum Mark</th>
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**Assessor’s Comments:**
Rhys

Elm Grove is a mental health outreach service for children and young people. The service specialises in providing emotional and well-being support for children and young people experiencing mental health issues and undergoing periods of transition. In addition, Elm Grove also provides training, advice and a range of therapies, supported by a range of professionals. The team at Elm Grove works in partnership with a number of residential and educational settings in the local area.

Rhys is 17 years old and has a history of substance misuse and mental health issues. Rhys has been in and out of the care system since he was very young. Throughout his life the only regular contact he has had with his family was with his sister. His sister had been a constant figure in his life, however last year she took her own life.

Following his sister’s death, Rhys became extremely depressed and started to display erratic behaviour, fuelled by his increased use of drugs and alcohol. Rhys had also been shoplifting to fund his habits and found himself in trouble with the police. There were often days when he did not return to his placement in a local residential setting that supports young people. Rhys had been sleeping at various hostels and different friends’ houses, moving regularly, and as a result was feeling quite unstable. Rhys’s mental health declined, but he was able to recognise this and visited Elm Grove for support. At Elm Grove, Rhys was able to bathe, eat, change into clean clothes and receive medication. The team at Elm Grove contacted the residential setting to update them on Rhys’ whereabouts and his condition, however he had already left before a team member arrived to speak to him.

More recently, Rhys has not come to his last two appointments. The team at Elm Grove has been very busy and as a result this has not been followed up.

Maria, the care team manager at Elm Grove, checks Rhys’s records and they show that his last visit was two weeks ago. The records from the most recent appointment suggest that he had been losing weight, had poor personal hygiene and was agitated. They also show that there were concerns about his mental health and it appeared that he was under the influence of alcohol again.

Maria contacts the residential setting to arrange an appointment but finds out he has not been there for nearly two weeks. The setting have already raised their concerns with his allocated social worker and the police. Maria tries to find him, contacting local hostels and friends he has stayed with in the past to arrange an urgent visit to assess his current situation.

Rhys is found sleeping on a sofa in a local hostel looking very unkempt. He becomes very agitated and distressed, but eventually reveals that he has been in trouble with some people he met through a social media site who he owes money to. He says he is frightened to go out, feels very unsafe, and desperately wants to change his situation.

Members of the Elm Grove care team spend time with him at the hostel reassuring him and listening to him. They explain that if he comes back to the service for regular support, the team can help him with his situation, ensure his safety and improve his health and well-being. Eventually Rhys agrees to return to Elm Grove for support.
Once back at Elm Grove Rhys is offered the opportunity to take a bath and change into some clean clothes before seeing other professionals for an assessment. Rhys mentions he is in some pain and it becomes apparent that there are some injuries to his upper body; including large bruises to his back and open cuts on his arms. Rhys is asked if he will consent to Maria assessing his injuries and to check if he needs further medical help, but it is explained that there is a duty for the issue to be reported. Rhys is reassured that his information will be kept confidential.

Rhys will soon be 18 years old, and has some important decisions to make. He will need to find some suitable accommodation that is safe and also find the correct support to meet his needs. Maria has arranged a multi-disciplinary team meeting, including a specialist young person’s advocate, to help support Rhys with these decisions.
Rhys

Question set A

1. Describe three potential outcomes if team members have a negative attitude towards young people who misuse substances. [3 marks]

2. Rhys will need to change his living situation when he turns 18.

Explain the approaches the team at Elm Grove can use to make this transition a positive one. [4 marks]
3. Describe **three** ways in which members of the support team can ensure Rhys and other young people in the setting are treated with dignity and respect. [3 marks]

4. What **three** pieces of advice could be given to Rhys to help keep him safe when using social media in the future? [3 marks]

5. Describe **two** ways that members of the care team can protect themselves from accusations of potential abuse towards individuals they support. [2 marks]
6. Rhys was initially reluctant to return to Elm Grove for support and to talk about his issues. Outline three reasons why children and young people might not disclose potential abuse.

[3 marks]

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7. Rhys had missed a number of appointments but this had not been followed up by Maria and the team.

Describe three ways in which this could have been identified and escalated sooner.

[3 marks]

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8. Outline three ways the young person’s advocate can support Rhys when making decisions about his future accommodation arrangements. [3 marks]

9. Rhys’ situation made him feel scared and unsafe.

Describe three ways the team at Elm Grove could help provide an environment where individuals feel safe to talk. [3 marks]
10. Describe **three** responsibilities of the care and support worker in safeguarding vulnerable people. [3 marks]
### Mark Scheme – Rhys Question Set A

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<thead>
<tr>
<th>Question (spec ref)</th>
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| 1. (Unit 2, 11.1)   | **Award 1 mark** for each outcome described up to a maximum of 3 marks.  
- May lead to discrimination and bias  
- Young people may feel they are to blame for their problems  
- Team members may feel young people are less deserving of support – not providing the support they need  
- May lead team members to miss signs and symptoms that relate to safeguarding concerns  
- Team members may not believe or action on what young people disclose  
- May result in young people being put off from receiving support/missing out on support they need  
- May lead team members projecting their own experiences onto young people unfairly  
- Team members may be disciplined/require further training  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 2. (Unit 2, 10.3)   | **Award 1 mark** for a limited response which shows little knowledge and understanding of how the approaches used by the care team make the transition positive.  
The response does not specifically link the approaches used to how the transition is made positive.  
**Award 2 marks** for a basic response which shows some knowledge and understanding of how the approaches used by the care team make the transition positive.  
The response may not fully link the approaches used to how the transition is made positive.  
**Award 3 marks** for a good response which shows knowledge and understanding of how the approaches used by the care team make the transition positive.  
The response links the approaches used with how the transition is made positive. | 4 marks |
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| *(spec ref)* | **Award 4 marks** for an excellent response which shows detailed knowledge and understanding of how the approaches used by the care team make the transition positive. The response clearly links the approaches used with how the transition is made positive.  

**Answers could include:**  
- Working together with a multi-disciplinary team to consider his situation from a range of professionals who can support, considering how they can support him (e.g. the advocate, social workers, leaving care workers etc.)  
- Working in person centred way - putting Rhys at the centre of the decisions/discussions, building trust  
- Focusing on positive outcomes for Rhys  
- Engaging with Rhys to identify what matters/is important to him  
- Being honest with Rhys about what is happening /is going to happen – e.g. requirements to report abuse  
- Being realistic with Rhys about what is achievable  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | |
| 3. *(Unit 2, 3.5)* | **Award 1 mark** for each way described up to a maximum of 3 marks.  
- Following established procedures  
- Following established codes of conduct/professional practice  
- Maintaining confidentiality – e.g. ensuring discussions are private  
- Ensuring privacy for personal care – e.g. when Rhys is taking a bath  
- Gaining consent  
- Following non-discriminatory working practices  
- Taking time to listen to young people and consider their specific circumstances without judgement  

*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
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| 4. (Unit 6, 2.8)    | **Award 1 mark** for each piece of relevant advice up to a maximum of 3 marks.  
  - Checking and being aware of security settings/sharing settings  
  - Being aware of implications of sharing information  
  - Not sharing personal information/sensitive information – e.g. location  
  - Knowing where to get help/report issues  
  - Being wary of accepting 'friend requests' from unknown individuals  
  - Being aware that individuals may not present who they really are / individuals may pretend to be someone they are not  
  - Not arranging to meet individuals met online in real life unless safety consideration have been met – e.g. not meeting alone, meeting in public  
  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 5. (Unit 6, 2.9)    | **Award 1 mark** for each way described up to a maximum of 2 marks.  
  - Following established procedures for recording accidents, incidents, near misses etc.  
  - Keeping up to date with current training/best practice  
  - Adhering to requirements of current legislation and any changes in legislation  
  - Working in line with job role, responsibility and capability level  
  - Sharing relevant information when working in partnership with others  
  - Escalating and reporting/recording issues following established protocols and procedures  
  - Following codes of conduct /professional practice  
  - Working in pairs where risk assessment identifies this as a requirement  
  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 2 marks |
| 6. (Unit 6, 3.2)    | **Award 1 mark** for each outlined reason up to a maximum of 3 marks.  
  - Fear of repercussions or reprisals  
  - Sense of shame – feeling that they are to blame | 3 marks |
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|                     | • Fear of not being believed and nothing will be done, or of what will happen next  
• They may have a relationship to the abuser – they may have a strong connection/care about them or believe they care about them  
• Not realising they have been abused  
• Not aware of how to get help – where to go/process for getting help  
• Abuser may be a professional/in a position of power  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* |
| 7. (Unit 6, 1.6)    | **Award 1 mark** for each described way up to a maximum of 3 marks.  
• Checking diary/schedule on a daily basis – ensuring there is an established system for flagging missed appointments with a mechanism for follow-up  
• Sharing information appropriately across the team and with other settings  
• Establishing and maintaining good links/communications with other settings and professionals in the area – network of support  
• Providing an advocate at an earlier stage  
• Ensuring looking for potential signs of abuse is established as a key part of all reviews/meeting  
• Establishing a key worker for Rhys – named individual  
• Recording information on a personal plan/care and support plan  
• System of handover of information to include good quality recording e.g. not just verbal  
*Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 marks |
| 8. (Unit 6, 2.2)    | **Award 1 mark** for each support point identified up to a maximum of 3 marks.  
• Listening to Rhys and providing an un-biased viewpoint  
• Support Rhys to make informed choices  
• Support Rhys to understand his rights | 3 marks |
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| | • Ensuring Rhys knows how to make a complaint if necessary  
  • Signpost support available e.g. housing options, benefits  
  • Attend meetings and help to present his point of view  
  • Explaining things in a way Rhys will understand – making sure he understands the options  
  • Representing him at meetings/supporting him and providing a voice when Rhys wants them to  
  • Provide support with paperwork and following required procedures – knowledge of how the systems work and what steps are required  
  *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | |
| 9. (Unit 6, 2.6) | **Award 1 mark** for each way described up to a maximum of 3 marks.  
  • Having team members that Rhys can trust – key worker/familiar face, consistency of provision  
  • Ensuring privacy – providing spaces for private discussions, considering the nature of conversations and matching the environment to them  
  • Fostering a culture of openness – individuals can disclose without fear of judgement  
  • Team members being open and honest about processes e.g. telling Rhys that they have a duty to report concerns  
  • Using communication tools – active listening, considering all ways individuals may express, being aware of visual cues (i.e. not just verbal communication)  
  • Working to create an informal unintimidating environment – warm, welcoming, not institutionalised  
  *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.* | 3 |
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<th>Question (spec ref)</th>
<th>Answer guide</th>
<th>Maximum Marks</th>
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| 10. (Unit 6, 2.1)   | **Award 1 mark** for each responsibility described up to a maximum of 3 marks  
|                     | • Reporting and recording any incidents  
|                     | • Referring any incidents to an appropriate person  
|                     | • Ensure informed consent is obtained when there are risks.  
|                     | • Identify potential risks to prevent possible harm where possible  
|                     | • Work in partnership with others to prevent harm/ take action  
|                     | • Maintain own CPD in relation to safeguarding  
|                     |  
|                     | *Other valid responses provided by candidates, which are not listed in the indicative mark scheme, should be accepted at the discretion of the assessor.*  
|                     |  
|                     | **Total unit 001: 10 marks, unit 006: 20 marks**  
|                     | 30 marks  |
This form must be submitted with evidence for verification.

**Declaration of Authenticity**

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**Candidate:**

I confirm that all work submitted is my own, and that I have acknowledged all sources I have used.

Candidate signature

Date

**Tutor/Assessor:**

I confirm that all work was conducted under conditions designed to assure the authenticity of the candidate’s work, and am satisfied that, to the best of my knowledge, the work produced is solely that of the candidate.

Tutor/Assessor signature

Date

**Note:**
Where the candidate and/or tutor is unable to, or does not confirm authenticity through signing this declaration form, the work will not be accepted at moderation and a mark of zero will be given. If any question of authenticity arises, the tutor may be contacted for justification of authentication.